

## Exception Request Form (ERF) Hiring Freeze and Position Cost Control Presidential Directive

The Hiring Freeze and Position Cost Control Presidential Directive allows for exception requests under certain very limited circumstances, including positions that support clinical care, COVID-19, health and safety, and positions supported through external funding.

The Exception Request Form (ERF) must be completed, submitted, and approved prior to initiating any transaction for which an exception is being sought, and must be included as approval documentation for the transaction. Please note that an approved ERF does not replace any standard review or evaluation process; it serves to authorize advancement of the request through standard operating procedures.

The final authority for approval of the ERF is dependent upon the type of transaction. If the exception authority lies at the Chancellor/SLT level, the Chancellor/SLT member serves as the final approver for the ERF. ERFs requiring UHR approval must be submitted to OneSource for review after receiving approval by the Chancellor/SLT member or designee.

Please complete this form by entering text or selecting from the drop-down box for each field name listed below. If a text box does not apply, please leave it blank. All drop-down boxes are required fields.

	Requestor's Information and Chancellor, SLT or Designee Approval:			
Department's Request Information and Chancellor, SLT or Designee Signature	Requestor's Name:  Requestor's School/Dept:			
(Required):	Requestor's Job Title:			
	Chancellor/SLT/Designee:			
	By signing this document, you are certifying that the information, provided in this form, is true and accurate.			
Position Category/ Exception Authority:	(Drop Down List)			
Request Type:	(Drop Down List)			
Campus:	(Drop Down List)			
School (Required):				
Complete if	New Position: Complete if Existing Position:			
Dept Unit #/Name: Job Title: Salary Plan: Grade/Step/Rank:	Faculty/Staff Name: Faculty/Staff Dept Unit #/Name: Faculty/Staff Job Title: Salary Plan:  Position Cando/Stan/Bonks			
Class:	Position Grade/Step/Rank: Class:			
Cost Estimate: Is this cost based on salary savings from somewhere else?				

Why is this neces	Excepti sary to support the operating unit?	on Justification (include the followin What is the impact to the operating	ng): unit if this request is not approved at this time	e?
Request Appro	oved			
Request Not A	approved at this time, pleas	se see justification below		
Signature:			Date:	
	Senior Vice President for Ho Organizational Effectivenes			