



Budget Authorization Form

Tax-Levy Funds

Search Yes No
 New Position Yes No
 Replacing Retirement/Termination Yes No
 Authorization for Substitute Yes No
 Other (i.e., Temp, Appt from List, etc) _____

Department/Office: _____ Region/School: _____

Payroll Title: _____

Functional Title/Business Card Title: _____

Reports to: _____

Previous Occupant First and Last Name: _____ Salary of Previous Occupant: \$ _____

Previous Occupant CUNYfirst Employee ID #: _____

Previous Occupant's Title: _____

Anticipated Date of Appointment: ____/____/____ Maximum Salary Requested: \$ _____

Potential/Current Employee: _____

CUNYfirst Title: _____

CUNYfirst Position #: _____ Effective Date: ____/____/____

Prepared by Chair/Head of Department: _____ ____/____/____

Approved by Dean/Director: _____ ____/____/____

Line #: _____	Search #: _____	FOR BUDGET USE ONLY
Maximum Salary Approved _____	Funding Source: _____	Line Conversion <input type="checkbox"/>

Approved by Assistant VP for Budget & Finance: _____ ____/____/____

Approved by Provost/Divisional Vice President: _____ ____/____/____

Affirmative Action Comments: _____

_____ ____/____/____

Advertising Plan Comments? Y/N