INTER-OFFICE CORRESPONDENCE **Los Angeles Community Colleges** To: **Deputy Chancellor** Date: From: _ Signature of President/Division Head College/District Office Subject: REQUEST FOR AUTHORIZATION TO FILL A PERMANENT POSITION (ACADEMIC OR CLASSIFIED) **Restricted Hiring Policy:** Effective January 14, 2008, submittal of this document to the Deputy Chancellor is required before any selection activity may occur for any permanent academic or classified position. The policy aims to achieve an appropriate level of cost containment to the extent possible during a period of fiscal exigency. Selection processes already underway prior to this date may be completed but this form is still required and should be forwarded to the Deputy Chancellor. 1. **POSITION INFORMATION** (check appropriate box) Academic (Faculty and Administrative)- Attach NOI New Classified Position – Attach C1121 Form Existing Classified Position (complete the following information): Class Code: _____ Class Title____ Position Number Assignment Basis (PSA): ______ Shift: _____ FTE: _____ GL:_____ Cost Center/WBS:_____ Fund:____ Prior Incumbent's Personnel ID#: 2. RATIONALE FOR PRIORITY HIRING REQUEST (attach additional sheet if necessary) DEPUTY CHANCELLOR'S OFFICE USE ONLY Approved (If approved, proceed with regular District academic hiring or Personnel Commission classified hiring procedures)

Not Approved

Signature of Deputy Chancellor Date

Return completed and signed form to the Deputy Chancellor's Office.

Statement of any special conditions, if applicable:

LACCD Restricted Hiring Procedure Approval Form 1/24/08