Duke University School of Nursing

Vacancy Management Form

*Please complete the fields below, obtain your Associate Dean’s signature and email in this Word document format with any back up documents attached to Selnatta Vereen* at [selnatta.vereen@duke.edu](mailto:selnatta.vereen@duke.edu) *for approval routing.*

Note: for clinical instructors, course instructors or seminar leaders, work with the finance office to create a list of all to be hired for the semester, the total cost, and how this compares to budget for approval. Don’t fill this out for every instructor or seminar leader.

**Requestor**  Click or tap here to enter text.

**Request Date**  Click or tap to enter a date.

**Is Position New or a Replacement?**  Choose an item.

**Faculty, Staff, Student, Post Doc**  Choose an item.

**Position Number, job code and job level**  Click or tap here to enter text.

**Funding Cost Center(s)** Click or tap here to enter text.

**Is Position 100% External Grant Funded and in the Budget?**  Choose an item.

**Describe Alternatives Explored to Avoid the Position** Click or tap here to enter text.

**Describe Justification for the Position** Click or tap here to enter text.

***Approvals***

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Associate Dean Approval Signature Date

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ADFA Approval Signature Date

*Revised 4/17/20*