

**PROVOST AUTHORIZATION TO FILL A VACANCY**  
**within Academic or Senior Administration**

Date: .....

TO: Provost

FROM: .....  
*Name Unit*

I request authorization to (check one)  fill or  create the position described below.

Title: .....

Description of Position: .....

Justification/Comments: .....

Indicate the Funding Source: .....

**EQUAL OPPORTUNITY UTILIZATION INFORMATION**

Contact the Office of Equal Opportunity (x5695) for this information

		Y	N
A.	Does underrepresentation of minorities or women exist in the hiring unit/division for the job group in which this title falls?	Women:	.....
		African American:	.....
		Other Minorities:	.....
		Total Minorities:	.....
B.	Does underrepresentation of minorities or women exist on campus for the job group in which this title falls?	Women:	.....
		African American:	.....
		Other Minorities:	.....
		Total Minorities:	.....

**AUTHORIZATION SIGNATURES**

**Endorsements:** .....  
*Department Chair Date*

.....  
*Dean Date*

**Approved/Disapproved** .....  
*(Please circle) Provost Date*

Upon approval by the Provost or Chancellor, a copy will be sent to the Director of Equal Opportunity and Diversity. Vacancy must not be announced or posted until the Notification of Position Vacancy packet is delivered to the OEOD & approved. Click here to access the OEOD Web site for the forms <http://www.umsl.edu/services/oeo/manual.html>