

This form is required for all RPAs necessitating advertising.

RPA NUMBER(S):		PROGRAM NAME:	
MAIN POSITION NUMBER:		WORK SCHEDULE:	
SECONDARY CLASS CODE:		SHIFT:	
WORKING TITLE:		TENURE:	TIMEBASE:
NUMBER OF POSITIONS:		LENGTH OF ADVERTISEMENT:	
MEDICAL REQUIRED:	Yes	No	
BACKGROUND REQUIRED:	Yes	No	
RE-AD RECYCLE JC:	Yes	No	
		CONTACT LETTERS:	Yes No
		RECRUITMENT SERVICES REQUESTED:	Yes No
		RECRUITMENT ANALYST:	

**REPORTING LOCATION**

**ADDRESS FOR APPLICATIONS**

**HIRING UNIT CONTACT (REQUIRED FOR CALCAREERS)**

Full Name Work Phone Number Work Email Address

**HIRING MANAGER (REQUIRED FOR ECOS ACCESS)**

Full Name Work Phone Number Work Email Address

**EMPLOYEE RESOURCE LIAISON (REQUIRED FOR CERT UNIT QUESTIONS)**

Full Name Work Phone Number Work Email Address

**SPECIAL LANGUAGE INSTRUCTIONS** (Indicate if the advertisement will require any special language.)

2nd Class	COI	LT	OOC	TAU
P&B12	P&B13	P&B15	SA/I	T&D

**OTHER SPECIAL INSTRUCTIONS**

**THIS PAGE IS FOR OHR STAFF ONLY**  
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**2<sup>nd</sup> Classification**

**Conflict of Interest**

**Limited Term**

**Out of Class**

**Student/Intern**

**Post & Bid BU 12**

**Post & Bid BU 13**

**Post & Bid BU 15**

**Training & Development**

**Temporary Authorization Utilization**