

**VCSBSA**  
**CLASSIFIED POSITION**  
**Position Authorization Request Form (PAR)**



District/Charter: \_\_\_\_\_

**BSA Office Use**

H&W: \_\_\_\_\_

1. Employee Name: \_\_\_\_\_
2. Board Action: ☐ Add ☐ Change ☐ Delete
3. Reason for Action: ☐ New Hire ☐ Termination ☐ Retired ☐ LOA ☐ Return LOA  
☐ Reassigned ☐ Step Change ☐ Other: \_\_\_\_\_

**Position: Use this section for all requests for positions**

1. Position Title: \_\_\_\_\_  
*(If new position title, attach a copy of Board approved job description)*
2. Position #: \_\_\_\_\_ Authorized FTE: \_\_\_\_\_
3. Position Effective Date: \_\_\_\_\_ Ending Date: \_\_\_\_\_
4. Pay Status: ☐ Equalized or ☐ Hourly
5. ☐ Calendar: \_\_\_\_\_ Number of contract days: \_\_\_\_\_  
☐ Hourly: Number of hours per day \_\_\_\_\_ Number of hours per year: \_\_\_\_\_
6. Salary Schedule: \_\_\_\_\_ Hourly/ Monthly Rate: \$ \_\_\_\_\_  
*(Schedule/Step)*
7. Budget Amount: \$ \_\_\_\_\_
8. Funding Accounts: \_\_\_\_\_
9. Comments/LCAP Goal/Action: \_\_\_\_\_

Superintendent/Director's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Date of Board Approved: \_\_\_\_\_