



## CONTACT INFORMATION

Requester: Matt Bolang Title of Requester: Director  
Dept. Phone Number/Extension: 6870 Date Requested: 6/19/25

## POSITION INFORMATION

Position Title: Administrative Specialist Supervisor: Lindsay Kalberer

1. Is the purpose of this request to fill a position as a result of a **vacancy**? Yes ☐ No ☒

If so, name of person last holding this position: \_\_\_\_\_

2. Is the purpose of this request to **reclassify** a current position? Yes ☐ No ☒

3. Is the purpose of this request to change the scheduled hours of an existing position? Yes ☐ No ☒ From: \_\_\_\_\_ To: \_\_\_\_\_

If so, name of current incumbent: \_\_\_\_\_

4. Is the purpose of this request to transfer a current position? Yes ☐ No ☒

If so, Current Department: \_\_\_\_\_ Proposed Department: \_\_\_\_\_

Position Type: Regular ☒ Term/Grant ☐ Temp. ☐ Unpaid ☐ Special ☐

Position Status: Full Time (30+) ☒ Part-Time (21-29) ☐ Part-Time (20 or Less) ☐ Number of hours per week: \_\_\_\_\_

Justification of request / change of position **(REQUIRED)**:  
Elimination of position due to reduction in funding in accordance with the Workforce Reduction Policy

## FUNDING INFORMATION

28.3473 hr./58,962.38 yr.  
Base Annual Salary: \_\_\_\_\_ This position is funded in whole or in part by a grant: Yes ☐ No ☐ % Funded: \_\_\_\_\_

Allocation **(Required)**: Current: Org. 22160100 % 100 Proposed (If changing): Org. \_\_\_\_\_ % \_\_\_\_\_

Position will be funded by: General Fund ☐ Enterprise Fund ☐ Special Revenue Fund ☒ Internal Service Fund ☐

## REQUIRED APPROVALS

Supervisor (if applicable) \_\_\_\_\_ Date \_\_\_\_\_ Department Head Matt Bolang Date 6/19/25

## HR OFFICE ONLY

Job Class: 1202 Job Title: Administrative Specialist Health Grade/Step: NU5 / 7

FTE: 1.0 Employee Group: NU HR Reviewed: Amy Hill Date: 06.23.2025

## BUDGET OFFICE ONLY

Position Control # 60100103 Org. 22160100

Funds Available: Yes ☐ No ☐ Object Code: 704000 ☒ 706000 ☐ 706001 ☐

Comments: elimination requires BOC approval

Budget Reviewed: 1502 Date: 6/25/25

Resolution #: \_\_\_\_\_ Board Authorized on Date: \_\_\_\_\_