Mt. Diablo Unified School District

Position Budgeting Form

Rec'd Date _____
- ☐ Pos Ctrl Report
- ☐ PBF Log # _____
- ☐ Prepare Tan/Pink BT
- ☐ Pending Scan
- ☐ Email to HRSYSMGR
- ☐ PBF Hardcopy Rec'd ____
- ☐ Update HRTBRG_____
- ☐ Update PBF Log
- ☐ Email Originator & HR
- ☐ BUID #_____
- ☐ BT DATE _____
- ☐ Add BT Date to PBF Log
- ☐ Scan to Appr Folder & File

Date: _____ For the School Year: _____

To: Position Budgeting Manager, Budget Department

From: _____ School/Site: _____

(Print administrator's name—this is the budget manager of the org key being used to fund the position)

_____ Phone:_____

(Administrator's signature) (date)

☐ Change funding on _____ ☐ Increase/Create ☐ Decrease/Eliminate

(start date)

➢ Please enter a requisition into TalenEd to post the new position immediately after Board approval.

		Funding (Full 32-digit Account Code)								
➢**PCN/Position**	**FTE (+/-)**	**Fund(2)**	**Resc(4)**	**Goal(4)**	**Func(4)**	**Prog(5)**	**Proj(3)**	**Loc(3)**	**Mgr(3)**	**Obj(4)**
➢_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
➢_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____

Site Plan Reference: _____

List all Employee Name(s) and ID(s) of Employee(s) (if known), or Vacant:

_____

Comments: _____

_____

Position Control Use Only

Est. full year:
___ to EOY:
Exp. supported by:
☐ ongoing ☐ ___ year(s) only
*Advance?*_____
☐ PKS
☐ New PCN

INSTRUCTIONS:

Submit to Position Budgeting Manager, who will route the form(s) through the approval process. inouyes@mdusd.org • fax (925) 609-8768 • phone (925) 682-8000, x4089

Steps to Approval

1. Estimated Cost (request from Position Budgeting Manager; allow up to one week)
2. Complete Position Budgeting Form and send it to Sandra Inouye, Budget Department. If PTA/PFC/PTSA funding source, attach minutes (submit a copy of the minutes approving the action) and attach Reimbursement from Outside Agency Agreement form.
3. Program Compliance (site plan reference and program compliance verified by Chief of Educational Services)
4. Budget Approval (budget/fund availability verified by the Executive Director of Budget and the Chief Business Officer)
5. Chief of Human Resources, Executive Director, or Superintendent Approval (by school level/reporting chain)
6. Position Control Approval (Position Budgeting Manager in Budget Department)
7. Board Approval (submitted as a consent agenda item by Senior Human Resources Specialists Confidential in HR)

Approved: _____

Chief of Educational Services Date

(LCAP/Site Plan/Program compliance and documentation/minutes/plan)

Approved: _____

Executive Director of Fiscal Services (Budget approval) Date

Approved: _____

Chief Business Officer Date

Approved: _____

Chief of Human Resources, Executive Director, or Superintendent Date

FS:ac

evised 12/25