

Department: _____

Date: _____

Position: _____

Date Vacated: _____

Number of positions with same title in department: _____

Number of positions on same shift with same title: _____

Describe Position Activity:

Work load statistics (i.e. number of permits, number of water bills):

What duties can existing staff complete:

What impact does this position have on the department:

Who can and is assisting during the vacant period:

SIGNATURE: _____

DATE: _____