



**Budget Approval Form
for Announcement of Vacant Positions**

Position Information			
Program # and Name:		Division/Section:	
Job Code:	Job Title:	Position #:	
Estimated Hire Date: / /	Replacement Position	New Position	
DNR Entry Hiring Salary: \$ <small>https://dnrintranet.org/hr/position-action-request</small>	Fringe Amount: \$ <small>(61.884% of the salary)</small>	Total Cost: \$	
Position Funding Sources			
State Funds:	Yes	No	Percentage
Federal Funds:	Yes	No (Fund name):	Percentage
Federal Funds:	Yes	No (Fund name):	Percentage
Other Funds:	Yes	No (Fund name):	Percentage
Other Funds:	Yes	No (Fund name):	Percentage
Justification Statement:			
<i>Critical Impacts associated with hiring delay (funding, program, time sensitivity, etc.).</i>			
Contact Information			
Name:	Phone #: () -	Email Address:	
Approver Information			
Division Director Signature:	Phone #: () -	Date: / /	
DNR Budget Office Authorized Signature:	Phone #: () -	Date: / /	
Commissioner Office Authorized Signature:	Phone #: () -	Date: / /	