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| ***Form is required when requesting an exception to the temporary suspension of non-essential HR actions***  *Editing is restricted. Please use drop-down menu in designated fields*  ***Approved forms must be attached******to the corresponding action******(ePAR, posting) in******ConnectCarolina or PeopleAdmin*** | | | | | |
| **SECTION 1 – SCHOOL/DIVISION/UNIT INFORMATION** *(COMPLETED BY CAMPUS HR)* | | | | | |
| **Date Prepared: Click or tap to enter a date.** | | | **Preparer Name (if not HR Officer):** | | |
| **School/Division (Select from drop down menu)**  **Dean/Vice Chancellor:** | | | **Department Name:**  **Department #:** | | |
| **School/Division HR Officer:** Select from drop down menu. | | | **School/Division Finance Lead:** Select from drop down menu | | |
| **Exception Reason:** Select from drop down menu | | | **Essential University Operation:** Select from drop down menu | | |
| **SECTION 1A - FUNDING:** (*COMPLETED BY CAMPUS HR AND CAMPUS FINANCE)* | | | | | |
| **Select primary funding source to be used**: Select primary fund source from drop down menu  Please confirm unit has available funds to support this request: Select Yes or No.  If no, please explain:  If position is not 100% funded by source listed above, please explain total funding*:*   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **Budgeted Range Min**  **Budgeted Range Max** |  | Budget available for requested position/salary and benefits – FY21  *Enter in number format* |  | Budget available for requested position/salary and benefits – FY22:  *Enter in number format* |  |   *By signing below, the campus finance lead confirms the following:*  Unit has available funds to support request and they have reviewed and approved this form  Recurring funding availability for salary and benefits during FY21 and FY22 for **all position, recruiting, hiring, and salary actions**.  Non-recurring funding availability for salary and benefits during FY21 and FY22 **for all temporary adjustments (overload payments, supplements, and temporary increases)** | | | | | |
| **Finance Lead Signature:**       *(****Only*** *the School/Division Finance Lead may sign/enter name here)* | | | | | |
| **SECTION 1B – REQUEST DETAIL –** *(COMPLETED BY CAMPUS HR)* | | | | | |
| **POSITION ACTIONS:**  Select from drop down menu | | | | | |
| Proposed Effective Date: Click or tap to enter a date.  Position Number:  Current Position Title:       (*For* *position title, enter working title for EHRA and Position Classification for SHRA)*  Current Position Classification:  Proposed Position Title:  Proposed Position Classification:  **NOTE:** *If an essential form was approved at position creation or modification, an additional form is not required prior to posting* | | | | | |
| **RECRUITMENT/HIRE ACTIONS:** Select from drop down menu | | | | | |
| Proposed Effective Date: Click or tap to enter a date.  Candidate/Employee Name:  Employee PID:  Position Number:  Vacancy ID Number:       (if applicable)  Position Title:  Position Classification:  Length of appointment (if fixed-term, temporary or time-limited:  **Date Position was vacated:** Click or tap to enter a date. **Reason Position was vacated:** Choose an item.  ***NOTE:*** *If hire is an internal candidate, please also complete Salary Action Section below* | | | | | |
| **SALARY ACTIONS:**  Select from drop down menu | | | | | |
| Proposed Effective Date: Click or tap to enter a date.  Employee/Selected Candidate Name:       Employee Type: Select from drop down menu  Position Title:       (*For* *position title, enter working title for EHRA and Position Classification for SHRA)*   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **6/30**  Base Salary  (Annualized) |  | **Recommended**  Base Salary (Annualized) |  | Cumulative % Increase to 6/30 Base Salary for fiscal year |  | | **6/30** Stipend/Supplement/Temp Assignment (Annualized) |  | **Recommended** Stipend/Supplement/Temp Assignment (Annualized) |  | Cumulative $$ Increase to 6/30 Base Salary for fiscal year |  | | **Current**  Base Salary  (Annualized) |  | Stipend/Supplement/Temp Assignment Duration |  | Total % Increase of Stipend/Supplement for fiscal year |  | | **Current** Stipend/Supplement/Temp Assignment (Annualized) |  | Overload (EHRA)/Additional Employment Amount (SHRA) |  | Total $$ Increase of Stipend/Supplement for fiscal year |  | | | | | | |
| ***SECTION 1C - Explanation/Justification Detail (Complete for all Action Types)*** | | | | | |
| ***Please explain why/how the request fits the exception reason selected:*** *Please do not copy position description or justification from Salary Adjustment Form****:*** | | | | | |
| ***Explain why the action must occur now and describe the specific consequences (e.g. legal, compliance, safety) of delaying the action until the temporary suspension is lifted.*** *For example, if “critical systems” is selected in Section 1, please explain what and how these systems will be impacted if the action is delayed.* | | | | | |
| ***Please discuss contingency plans that will be implemented if this request for essential action is deferred or disapproved.*** | | | | | |
| *By signing below, the preparer certifies that appropriate management approvals (e.g. dean, vice chancellor) have been obtained and that this request complies with applicable institutional policies and procedures (e.g. employment approvals, tenure and promotion process, UNC code compliance, UNC SO compliance, OSHR compliance and any local University procedures).*  Preparer Signature/HR Officer Signature: | | | | | |
| **SECTION 2 – OFFICE OF HUMAN RESOURCES OR ACADEMIC PERSONNEL ONLY** | | | | | |
| Off-campus approval required? Select Yes or No  If yes, what level(s): Select from drop down menu | | | | | |
| **OHR/AP Representative:** | |  | | **Date:** | **Click or tap to enter a date.** |
| **NOTES (CENTRAL OFFICES ONLY)** | | | | | |
| Request Status | | | | | |
| **NOTES** |  | | | | |
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**Where to send the Request for Essential Action Request**

***Finance Lead and HR Officer must be copied on submission to Academic Personnel or OHR***

|  |  |  |  |
| --- | --- | --- | --- |
| **Request Type** | **EHRA Non-Faculty** | **Faculty** | **SHRA** |
| **Position** | [epanfsalaryrequest@unc.edu](mailto:epanfsalaryrequest@unc.edu) | [facultypositions@unc.edu](mailto:facultypositions@unc.edu) | Assigned Classification & Compensation Consultant |
| **Recruitment/Hire** | Assigned Talent Acquisition Partner | [facultypositions@unc.edu](mailto:facultypositions@unc.edu) | Assigned Talent Acquisition Partner |
| **Salary Adjustment** | [epanfsalaryrequest@unc.edu](mailto:epanfsalaryrequest@unc.edu) | [apir@unc.edu](mailto:apir@unc.edu) | Assigned Classification & Compensation Consultant |

**Notes:**

* ***Accurate and fully completed forms*** *submitted by close of business on* ***Monday*** *will be forwarded to the chancellor or his designee the same week it is submitted.*
* *If deemed essential by the chancellor, actions under local authority may proceed; Actions exceeding campus approval thresholds must be forwarded to the appropriate off-campus approver (System Office, BOT, or BOG) and may not be implemented until all required approvals have been received.*
* ***Approval/Denial Notifications:*** *Departments will be notified via email with the Request for Essential Form attached for faculty position/recruitment/hire requests, EHRA non-faculty position/recruitment/hire requests and SHRA position/recruitment/hire requests. Departments will continue to be receive notifications on faculty salary adjustment requests via email.*
* ***Initiating the Action:*** *Request for Essential Action or email confirmation (for faculty) must be attached to the corresponding action when submitted in ConnectCarolina or PeopleAdmin.*
* *Confirmation that an action has been approved as an exception by the chancellor/chancellor's designee is required for all requests except hires or new positions that are fully grant funded as long as funding contingencies are provided for in the appointment.*
* *Blanket exceptions may only be approved for positions performing clinical healthcare/patient-facing, police and public safety, and environmental health and safety functions*. *.* [go.unc.edu/suspension-non-essential-actions](https://go.unc.edu/suspension-non-essential-actions)
* *Request for Essential Action Forms are no longer required for postdoc reappointments* ***with*** *an associated salary adjustment.*

**Critical On-Campus Operations and Support Functions**

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| **Critical Operations** | **Support Functions** | **Responsibility** |
| Approved Residential Students (including quarantine facility) | * Feeding * Health & Wellness * Vendor Services * Facilities (w/ Housing Support) * Community Directors | **Primary**: Carolina Housing  **Support**: Auxiliary Services, Campus Health, Facilities |
| Campus Safety | * Campus Police * Health and Safety * Emergency Management (EOC) | **Primary**: Campus Police  **Support**: Environmental Health and Safety, Emergency Management and Planning |
| Construction | * Healthcare (COVID-19 related) * Emergency Repair | **Primary**: Facilities  **Support**: Housing, Campus Health |
| Critical Systems | * Energy Services * Facilities (EMCS) * ITS (Telecom) * Vendor Services | **Primary:** Energy Services  **Support:** ITS, Facilities |
| Research | * Animal Care * Critical Equipment Maintenance (Vendors) * High Containment Labs Monitoring | **Primary**: Research  **Support**: Facilities |
| Continuity of Instruction (including classroom access) | * ITS Support * Specialized classroom accommodations/ equipment (multiple modes of instruction) * Classroom scheduling prioritization * Building/classroom hygiene | **Primary**: Academic Affairs/Provost Office  **Support**: ITS, Registrar’s Office, Oasis, Facilities Operations (Housekeeping) |
| Continuity of Administration | * Direction and executive leadership * Crisis executive decision making | **Primary:** Chancellor  **Support:** Provost, Chancellor’s Senior Cabinet |