**Form B-2 (8/2023)**

(Date)

TO: The Honorable Josh Green, M.D.

Governor of Hawaii

THRU: Luis P. Salaveria

Director of Finance

FROM: (Department Head, Title)

(Department)

SUBJECT: Request to Establish and Fill (or Extend) Unauthorized (and/or Exempt) Position

Approval is requested to establish and fill (or extend) the following unauthorized (and/or exempt) position:

1. Position Title:
2. Description of functions and responsibilities:
   * Note if position is unique; i.e., only position in the organization that performs the particular function.
3. Program ID/title; Division/Branch/Section (as applicable); location:
4. Salary and means of financing (general, special, federal, etc.; for other than general fund, indicate specific fund source):
5. Nature of appointment:
   1. Projected appointment date:
   2. Civil service/exempt:
   3. Duration position needs to be filled:
   4. Part or full-time (40 hrs. per week) (If part‑time, indicate number of hours to work per week.):
   5. If exempt, attach a copy of Department of Human Resources Development or delegated approval:

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1. Justification for establishing and filling (or extending) the position:
   * + Identify the authority to establish the position.
     + Provide specific, complete justification, including alternatives investigated; specific adverse impacts of delay in hiring; specific adverse, irreparable impact to services to the public, etc.
2. Attach organization chart reflecting where the requested position will be placed.
3. Department review of request:
   1. Reviewed and approved by division or attached agency administrator:

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Name Telephone Date

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Signature

* 1. Reviewed and approved by department administrative services officer:

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Name Telephone Date

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Signature

* 1. Reviewed and approved by department head:

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Signature Telephone Date

RECOMMEND:

⬜ APPROVAL ⬜ DISAPPROVAL ⬜ DEFER

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DIRECTOR OF FINANCE

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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⬜ APPROVED ⬜ DISAPPROVED ⬜ DEFER

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JOSH GREEN, M.D.

Governor, State of Hawaii

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DATE

Attachment