INTER-OFFICE CORRESPONDENCE
Los Angeles Community Colleges

To: Division of Human Resources  
From: [Signature of President]  
Date: 6-11-2014

Subject: NOTICE OF INTENT TO FILL ACADEMIC (CERTIFICATED) POSITION

Directions: Complete sections A, B, and C. Section D is for PACE only. Use E, F, G for compliance with District Board Rule (Chapter X, Article 6, 10301 - www.laccd.edu/board_rules), Ed. Code, Title 5, and College hiring procedures.

A. Administrator in Charge: [Signature of President]  
Position Type:  
- Faculty  
- Administrative

Class Code 0640  
Position Title: Dean of Student Success

Assignment Basis FTE

For ISAVCI—waiver will be required if using general funds; for SPF—waiver not required.

Position Status:
- Faculty  
  - Probationary/Tenure track (*see #F)  
  - Long Term Sub (LTS)  
  - Limited (LT)

- Administrative  
  - Continuing (permanent) (*see #F)  
  - Acting  
  - Interim (selected candidate cannot be considered for permanent position)

B. Position is: New X  
If not new, provide name of person being replaced:  

Recruitment start and end dates (6 week minimum for probationary and continuing positions): From 6-20-14 To 7-1-14

(3 week minimum for LTS and LT)

Date to be filled (EXPECTED HIRE DATE) From 7-1-14 To  

Note: Provide end date only if position is for Limited, Long Term Sub, Acting, or Interim status.

Budget Program No. 10430-M6311-122100  
SFP: Yes  
No

D. PACE O or ITV position  
Will you be selecting from the PACE faculty roster/ITV faculty roster? Yes O No O

If selected from the PACE/ITV Roster, email P. Martinez at pmartinez@laccd.edu with the name of the person and semester start date.

E. MAILING LIST - provide an email address where list is to be sent

F. WEBSITE POSTING - email your announcement or job description to: job postings@laccd.edu

*Required to post in State Registry website; email job description to: registry@yoaemile.cc.ca.us

G. TRANSFER LIST
- Faculty: MANDATORY INTERVIEW
- Administrative: OPTIONAL INTERVIEW

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Division of Human Resources:

☑ Approved for Processing

X Direct appointment by Chancellor

☐ Selection procedures

☐ Not Approved

☐ See Comments Below

Signature: [Signature of President]  
Date: 6-23-14

MAILING LIST

Sent by ____________________________  
Date ____________________________

[Signature]  
Date ____________________________

[Signature]  
Date ____________________________

[Signature]  
Date ____________________________

LACCD Form 317 1/08