

**UNIVERSITY OF SOUTH FLORIDA**  
**REQUEST FOR WAIVER OF ADVERTISEMENT**  
*for Staff and Administration Positions*  
**OFFICE OF DIVERSITY AND EQUAL OPPORTUNITY**

**PART A:**

(1) <b>Provost/VP Area:</b>	(2) <b>College and Department:</b>
(3) <b>Position Title:</b>	(4) <b>Position or Tracking#:</b>
(5) <b>Requestor Name:</b> <b>Title:</b> <b>Phone#:</b>	(6) <b>Contact Person Name:</b> <b>Title:</b> <b>Phone#:</b>

**Section 1**

<b>Name of Candidate:</b>	<b>Race/Ethnicity:</b>	<b>Sex:</b>	Is candidate currently employed at USF:
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**Section 2**

Type of appointment for which this Waiver is requested: Staff  Administration

(1)	(2)	(3)	(4)
Permanent: Visiting: Change in Funding:	Estimated period of employment if a Visiting appointment: From: To:	Proposed Salary: \$ <input style="width: 80px; height: 20px;" type="text"/> Percent (fte):	Funded from contract/grant: Yes <input type="checkbox"/> No <input type="checkbox"/> If grant-funded, list title(s) and name (s) of Grant(s):

**Section 3**

Each request must be approved by the Office of the Provost or of the appropriate Vice President and accompanied by:

1. Letter explaining why waiver should be granted. (see sample letter: [http://usfweb2.usf.edu/eoa/documents/memo\\_request\\_for\\_waiver.pdf](http://usfweb2.usf.edu/eoa/documents/memo_request_for_waiver.pdf))
2. Copy of page(s) of Equity Accountability Plan or Affirmative Action Plan of the University showing goals of the Vice President area. (for example: see Tables 1-6 in the EAP for Assistant Directors and above positions or see the Utilization Analysis Table in the AAP for staff and administration positions below Assistant Directors).
3. Copy of resume of the candidate and other pertinent information.

**Note: Approval of candidate qualifications must be approved by Human Resources prior to submitting the Request of Waiver to Diversity and Equal Opportunity.**

**PART B: SIGNATURES** *(THERE MUST BE A SIGNATURE ON ALL LINES IF NOT THE FORM WILL BE RETURNED TO THE DEPARTMENT)*

(1) Reviewed by Equal Opportunity Liaison/Designee/Department HR representative: Name _____	Signature _____	Date _____
(2) Dean/Director or designee: Name _____ [ <input type="checkbox"/> ] Approved [ <input type="checkbox"/> ] Denied		
Signature _____ Date _____		
(3) Provost/Vice President or designee: Name _____ [ <input type="checkbox"/> ] Approved [ <input type="checkbox"/> ] Denied		
Signature _____ Date _____		
(4) Human Resources: Name _____ Signature _____ Date _____		
(5) Associate Vice President for Diversity and Equal Opportunity: Name <u>Dr. Jose Hernandez</u> [ <input type="checkbox"/> ] Approved [ <input type="checkbox"/> ] Denied		
Signature _____ Date _____		