



CITY AND COUNTY OF SAN FRANCISCO
DEPARTMENT OF HUMAN RESOURCES

Instructions: Complete and attach this form to the Request to Fill (RTF) Electronic Service Request (ESR). When saving this form, please use the following naming convention: RTF_Express_Department Code (3 digit alpha code)_Job Code_Position Number (PeopleSoft Position Number)_Date (MMDDYY).

Example: RTF_Express_DHR_1234_12345678_072712

ASO Section 1.1.D.: "The Human Resources Director is authorized to make permanent exempt appointments for a period of up to 6 months to permit simultaneous employment of an existing city employee who is expected to depart City employment and a person who is expected to be appointed to the permanent position previously held by the departing employee when such an appointment is necessary to ensure implementation of successful succession plans and to facilitate the transfer of mission-critical knowledge within City departments."
(New language effective FY 2008-09)

Date of Request: _____

Department Contact: _____ Email: _____ Phone: _____

SECTION I: DEPARTMENT INFORMATION

Department Code: Dept. #: _____ Division: _____ Section: _____

SECTION II: POSITION/BUDGET INFORMATION

Job Code: _____ Job Title: _____

Replaces position #: _____ MCCP#: _____

Fiscal Year: _____ ASO item? Yes No

Index Code: _____ Program: _____ Sub Fund: _____

Project: _____ Position Indicator: _____ FTE: _____ Grant: _____

Begin Date: _____ End Date: _____ Amount: _____

SECTION III: CURRENT INCUMBENT INFORMATION

Current Incumbent Name: _____

Reason for Separation: _____

Separation documents on file?

Yes, attach a copy with Request to Fill/Modify ESR

No, explain why: _____

SECTION IV: JUSTIFICATION FOR POSITION REQUEST

Mission Critical Knowledge: Describe the mission critical knowledge that is necessary to be transferred for this position that requires a permanent appointment to backfill the anticipated vacancy.

Succession Plan: Describe in detail your department succession plan, why it is necessary to be successful, and the critical role and impact this position has on the overall success of the plan.

Consequences of Denial: Describe in detail the consequences that would result if the department is not allowed to backfill the anticipated position vacancy.

- Is there written documentation that will guide the position? Yes No
- If answer is no, will the department produce written procedures for the duties of this position during the proposed (six-month) backfill period? Yes No
- Is the manager whom this position reports available to train and ensure a successful succession plan? Yes No

ASO AMENDMENT REQUEST FORM
FOR SUCCESSION PLANNING

SECTION V: DEPARTMENT CERTIFICATION

The authorized departmental representative named below hereby certifies that the information provided in this document is accurate and complete, and acknowledges no other options are available outside the ASO Section 1.1.D. provision.

Authorized Representative DPO/CFO (Name) Date

Notes (Department Only):

APPROVALS (DHR ONLY)

Signature of Client Services Representative Date

Signature of Client Services Manager Date

Signature of DHR Director Date