Faculty and Other Academic Positions
Exception Request Form (ERF)

The Exception Request Form (ERF) must be completed, submitted, and approved prior to initiating any transaction for which an exception is being sought, and must be attached as supporting documentation with the personnel transaction in ROCS, ServiceNow, or PeopleSoft depending on the nature of the transaction. The ERF must be approved by all levels as outlined in the Exception Authority Matrix before the requested action or transaction may proceed. Please ensure all required fields are completed and that any supporting documentation is attached at the time of submission.

Approval of this form authorizes review of the request in accordance with the Position Cost Control guidelines. Submission of this form does not guarantee approval and does not replace any additional reviews, evaluations, or approvals that may be required.

Requestor's Name: Melissa Marrero **Requestor's Title:**

School/Center/Institute: Please Select

Department:

Request Type: -- select -- **Indicate # to be filled if multiple vacancies:**

Position Type: -- select --

Negotiating Unit: -- select --

Exception Category:

-- select --

Employee or Candidate Name (if applicable):

Position Title:

Based on the Exception Category identified above, please provide the justification below:
Why is this necessary to support the operating unit? What is the impact on the operating unit if this request is not approved at this time?

If processing multiple secondary summer assignments, please indicate #:

Upload Additional Supporting Documents
*Attachment **required** if ERF will be used for more than one transaction*

FY'27 Budget Details

What is the anticipated budget impact of this action? -- select --

Financial amount of request: $

	Salary	Fringe	Other	Total
Budgeted	$	$	$	$ 0.00
Proposed	$	$	$	$ 0.00
Financial Impact	$ 0.00	$ 0.00	$ 0.00	$ 0.00

Funding Source for Request

	Restricted/External (e.g., grants, contracts)	Restricted/Internal (e.g., gifts, endowments)	Unrestricted
Salary	$	$	$
Fringe	$	$	$
Other	$	$	$
Total	$ 0.00	$ 0.00	$ 0.00

Independent Contractor Details. If applicable to your request, fill out the following information

Independent Contractor Type: -- select --

Length of Term: years months

Total Contract Value (amount to be paid over the full term of the contract): $

	Restricted/External (e.g., grants, contracts)	Restricted/Internal (e.g., gifts, endowments)	Unrestricted	Total
Amount	$	$	$	$ 0.00

Temporary Staffing Firm Details. If applicable to your request, fill out the following information.

Temporary Staffing Firm Type: -- select --

Length of Term: years months

Total Contract Value (amount to be paid over the full term of the contract): $

	Restricted/External (e.g., grants, contracts)	Restricted/Internal (e.g., gifts, endowments)	Unrestricted	Total
Amount	$	$	$	$ 0.00

Provost / Executive Vice Chancellor for Academic Affairs Determination:

Request Approved

Request for Approval (required):

Request Not Supported at this time (see comments below)

Additional information required (see requested information below and resubmit)

Signature: _____ **Date:** _____

Senior Vice Chancellor for Finance & Administration Determination:

Request Approved

Request Not Supported at this time (see comments below)

Additional information required (see requested information below and resubmit)

Signature: _____ **Date:** _____

Chancellor Determination:

Request Approved

Request Not Supported at this time (see comments below)

Additional information required (see requested information below and resubmit)