

**Mt. Diablo Unified School District  
Request for Increase/Decrease in Staff Allocation**

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Date: \_\_\_\_\_ For the School Year: \_\_\_\_\_  
 To: Michelle McAvoy, Position Budgeting (Budget & Fiscal Services)  
 From: \_\_\_\_\_ School/Site: \_\_\_\_\_  
 (Print Administrator's Name)  
 \_\_\_\_\_ Phone: \_\_\_\_\_  
 (Administrator's Signature) (Date)

Request to  increase/create or  decrease/eliminate staffing as follows:

Position	FTE*	Funding				Funded FTE
		Site	Prog	Func	Object	
➤ _____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

\*If this is an hourly position (Resource Person, Noon Supervisor, etc.), estimated hours to budget for this year: \_\_\_\_\_  
 Name and ID of Employee (if known), or Vacant: \_\_\_\_\_  
 Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**INSTRUCTIONS:**  
**Submit staffing allocation form to Michelle McAvoy and she will route it through the approval process.**  
 If funded through categorical programs, submit with a copy of the Site Council minutes. If funded through reimbursement from outside sources, submit with a copy of relevant minutes and completed Reimbursement from Outside Agency Agreement form.

**Steps to Approval**

- Estimated Cost (request from Michelle McAvoy—mcavoy@mdusd.org; allow up to one week)
- Minutes (If Site Council program, submit copy of minutes approving the action; if Reimbursement from Outside Sources, such as PFC/PTA/PTSA, submit completed Agreement for Reimbursement from Outside Agency form.)
- Program Compliance (Staffing Allocation will be forwarded to Student Achievement & School Support in Wing C)
- Fiscal Approval (budget/fund availability verification by Mika Arbelbide or Nance Juner in Fiscal Services)
- Assistant Superintendent Approval (Student Achievement & School Support or Personnel Services)
- Position Control Approval (Michelle McAvoy in Fiscal Services)
- Board Approval (submitted to Board by Emily Lopez or Annette Campanella in Personnel Services)

Approved: \_\_\_\_\_  
 Student Achievement & School Support Date  
 (Program compliance and required minutes)

Approved: \_\_\_\_\_  
 Budget & Fiscal Services Date  
 (Budget approval)

Approved: \_\_\_\_\_  
 Assistant Superintendent or Superintendent Date

*Retain a copy of this form for your own records.*