

**JUSTIFICATION TO FILL
DURING THE HIRING FREEZE**
(To be completed by the agency)

Agency Name: _____

Position Title: _____

Position Number: _____ Job Code: _____

Length of Time Position Has Been Vacant: _____ Grade: _____

Anticipated Hiring Rate: _____ Funding Source: _____

Please provide a brief explanation of the mission critical nature of this position and the expected impact to the agency's mission if this position remains vacant:

Agency Head or Authorized Designee

Date

Please provide a return email address: _____

ADOA Use Only	
_____ Scott A. Smith, ADOA Director	<input type="checkbox"/> Approved <input type="checkbox"/> Denied

Please submit this form electronically:

**Arizona Department of Administration
Director's Office
Email: DirectorsOffice@azdoa.gov**