

**EXECUTIVE COMPENSATION PLAN - RECRUITMENT DOCUMENTATION**

The Affirmative Action Program of The City University of New York mandates that equal opportunity be offered to qualified persons when vacant positions are filled. In particular, a good faith effort is to be made to encourage women and minorities to apply for each available vacant position.

**PART I:**

This part, accompanied by a recruitment plan, is to be submitted to the College Affirmative Action Officer for approval before the vacancy notice is issued.

I certify that I have reviewed and approved the proposed recruitment plan submitted by

Department/Chair's name	Department/ Office
for the position of	Job ID #
Affirmative Action Officer	Date

**PART II:**

Federal and University regulations require documentation of the recruitment efforts. The following information is to be submitted with all documents required for appointments of candidates.

Department (Office) \_\_\_\_\_

Name of candidate selected: \_\_\_\_\_ Title: \_\_\_\_\_

1. What sources (CUNY postings, newspapers, journals, organizations, etc.) were used to recruit candidates for this position?

_____	_____
_____	_____
_____	_____

2. Total number of applications received: \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

3. Of the above candidates, indicate how many were interviewed:

	Black	Hispanic	Asian / Pacific Islander	Native American	Italian American	White	Total
Men							
Women							

4. From what specific source was the selected candidate recruited? \_\_\_\_\_

5. Name of the first candidate offered the position: \_\_\_\_\_

Did the candidate accept?      Yes      Salary: \$ \_\_\_\_\_      Rank: \_\_\_\_\_  
    No      Stated reason: \_\_\_\_\_

6. Additional candidate(s) offered the position: \_\_\_\_\_  
 Did the candidate accept?      Yes      Salary \$ \_\_\_\_\_      Rank: \_\_\_\_\_  
    No      Stated reason: \_\_\_\_\_

7. Names of other candidates interviewed but not offered the position:

_____	_____
_____	_____
_____	_____

**REGULATIONS REQUIRE THE RETENTION OF ALL SUPPORTING DOCUMENTS FOR AT LEAST THREE (3) YEARS.**

I certify that the above is true to the best of my knowledge and belief.

_____	_____	_____
Name and Signature of Chairperson/Dept. Head	Department	Date

_____	_____
Name and signature of Affirmative Action Officer	Date

_____	_____
Name and signature of Chair of College Personnel & Budget Committee or Designee	Date

_____	_____
President	Date