**Business Case for SAF**

This form is to be used to outline the business case for recruitment or extension of contracts and should be submitted for consideration at a ULT recruitment prioritisation meeting. If approved this should be submitted with the SAF (where prompted to upload job description) on the SAF system.

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| **Business Area / School:** |
| **Subject Group/Service Area:** |
| **Dean/Head of Service:** |
| **ULT Member:** |
| **If this Business Case is linked to an existing SAF – please detail SAF number:**  |

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| **Summary of approach across School / Subject / Service:** |
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| **Specific Recruitment Requests (1 of X)** |
| **Role title:** |  | **SAF number:** |  |
| **Number of roles:** |  | **Required start date:** |  |
| **Grade:** |  | **Direct Replacement or New:** |  |
| **Weekly hours:** |  | **On costs per role:** |  |
| **Rational for and consequences of not progressing role(s):**  |
|  |
| **Approach to recruitment (*Whether role is to be filled internally, approach to backfill, etc):*** |
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| **Specific Recruitment Requests (2 of X)** |
| **Role title:** |  | **SAF number:** |  |
| **Number of roles:** |  | **Required start date:** |  |
| **Grade:** |  | **Direct Replacement or New:** |  |
| **Weekly hours:** |  | **On costs per role:** |  |
| **Rational for and consequences of not progressing role(s):**  |
|  |
| **Approach to recruitment (*Whether role is to be filled internally, approach to backfill, etc):*** |
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| **Specific Recruitment Requests (3 of X)** |
| **Role title:** |  | **SAF number:** |  |
| **Number of roles:** |  | **Required start date:** |  |
| **Grade:** |  | **Direct Replacement or New:** |  |
| **Weekly hours:** |  | **On costs per role:** |  |
| **Rational for and consequences of not progressing role(s):**  |
|  |
| **Approach to recruitment (*Whether role is to be filled internally, approach to backfill, etc):*** |
|  |

Delete or add as appropriate

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| **Details of other options considered:** |
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| **What are the consequences of progressing with the proposed approach?** *Please include detail of planned activity that will need to cease.* |
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| **How will the post(s) be funded?**  |
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| **Date of submission:** | **Submitted by:** |

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| **Leadership approval** |
| **Approved** | YES [ ]   | NO [ ]   | **Date of discussion:** |  |
| **Feedback if not approved:** |  |

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| **Associated SAFS** |
| **Raised pre business Case** |  |  |
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| **Raised post business Case** |  |  |
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