

NEW POSITION: Brief job description and attach a copy of the new job description.

This position will also maintain the shop in good working condition and will develop effective safety procedures.

POSITION RECLASSIFICATION: Explain change and /or increase in duties and responsibility. (Attach new job description)

N/A

ADDITIONAL DUTIES: Explain reason for additional duties and attach list of additional duties.

N/A

COMMENTS: (Any comments you wish to make regarding this request)

N/A

HUMAN RESOURCES: Classification and Salary Recommendation

BUDGET & MANAGEMENT: Classification and Salary Recommendation

1. <u>Chyler A. Standy</u> <u>9/3/08</u>	FUNDING AVAILABLE IN DEPT. BUDGET	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
2. <u>[Signature]</u> <u>9/5/2008</u>	PERSONNEL PROCEDURES COMPLETED	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
3. <u>[Signature]</u> <u>9/5/08</u>	BUDGET PROCEDURES COMPLETED	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
4. _____	COMMISSIONER'S COURT APPROVAL	DATE	



HIDALGO COUNTY

Personnel Adjustment Request Form

DEPARTMENT NAME/NUMBER:
Precinct 1 / 121
CURRENT POSITION TITLE:

DATE:
September 3, 2008
CURRENT SLCT. #:

REQUESTED POSITION TITLE: Mechanic III
(For new positions or reclassifications) (New Slot #121-005-077)

REQUEST FOR:

New Position Temporary Position Position Reclassification* Other _____

*Civil Service Positions are submitted to the Civil Service Commission.

POSITION SALARY REQUEST:

Salary Amount: \$ -0- Current Budgeted Salary \$ 37,440.00 Proposed Budgeted Salary \$ 37,440.00 Net Change

Position to be funded from one of the following:

Current Department Budget Annual Budget Cycle Will Require Additional Funds
 Other _____

POSITION Type:

Full Time Employee Object 113 Part Time Employee Object 114 _____
Full Time Temporary Object 121 Part Time Temporary Object 122 \$ _____
Enter hourly rate for temp. positions
Hourly Rate * 2,080 hrs. per year = Annual Salary

TEMPORARY POSITIONS:

Start Date	End Date	Working Days & Hours	Hours Per Week	Duration (2 weeks, 3 months, etc.)
CIVIL SERVICE: Exempt <input type="checkbox"/> FLSA: Exempt <input type="checkbox"/> Non-Exempt <input checked="" type="checkbox"/> Non-Exempt <input checked="" type="checkbox"/> N/A <input type="checkbox"/>				

JUSTIFICATION/PRIORITY: (Explain why this position or adjustment request is essential)

This position will allow to expedite repair jobs. Will require skills to repair and recommend proper vehicle maintenance. This will also be a supervisory position and the incumbent will demonstrate on-going competence in being able to delegate responsibility as well as instruct and train employees on proper shop procedure and proper equipment/tool handling and training.

NEW POSITION: Brief job description and attach a copy of the new job description.

This position will coordinate and schedule request for vehicle maintenance repairs.

Will also decide whether to purchase new, rebuilt, or used parts to repair vehicles and equipment in the shop.

POSITION RECLASSIFICATION: Explain change and /or increase in duties and responsibility. (Attach new job description)

N/A

ADDITIONAL DUTIES: Explain reason for additional duties and attach list of additional duties.

N/A

COMMENTS: (Any comments you wish to make regarding this request)

Due to skill expretise, this position will also help on lowering cost on repairs.

HUMAN RESOURCES: Classification and Salary Recommendation

BUDGET & MANAGEMENT: Classification and Salary Recommendation

1. <u><i>Stephen D. Standley</i></u> ^{MM} <u>9/3/08</u> DEPARTMENT HEAD DATE	FUNDING AVAILABLE IN DEPT. BUDGET	<input type="checkbox"/> YES	<input type="checkbox"/> NO
2. <u><i>John C. ...</i></u> HUMAN RESOURCES DIRECTOR DATE <u>9/5/2008</u>	PERSONNEL PROCEDURES COMPLETED	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
3. <u><i>...</i></u> DEPARTMENT OF BUDGET & MANAGEMENT DATE <u>9/5/08</u>	BUDGET PROCEDURES COMPLETED	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
4. _____ COMMISSIONER'S COURT APPROVAL	DATE		