



COUNTY OF HIDALGO

Human Resources Department



PERSONNEL ADJUSTMENT REQUEST FORM

NOTE: COMPLETE MULTIPLE PERSONNEL ACTION FORM IF DEPARTMENT IS REQUESTING MORE THAN (3) PERSONNEL ACTIONS.

DATE: 10/26/2016 CURRENT POSITION TITLE: Air Condition Technician Helper
 DEPARTMENT NAME: Facilities Management CURRENT SLOT NO.: 0017
 DEPARTMENT NO.: 220-001 REQUESTED POSITION TITLE: Custodian II

REQUEST FOR: New Position Temporary Position Position Reclassification* Other Title Change

SALARY REQUEST: \$ 26,794.00 \$ 26,794.00 \$ 0.00
Current Grade & Step Budgeted Salary Proposed Grade & Step Budgeted Salary Net Change

POSITION TO BE FUNDED FROM ONE OF THE FOLLOWING:

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

POSITION TYPE:

Full Time Regular Object Code 113 Part Time Regular Object Code 114
 Full Time Temporary Object Code 121 Part Time Temporary Object Code 122

CIVIL SERVICE:

Exempt Non-Exempt **FLSA:** Exempt Non-Exempt

TEMPORARY POSITIONS:

Start Date	End Date	Work Schedule	Hours Per Week	Duration of Position
Annual Salary _____			Hourly Rate _____	
<small>Annual Salary / 2080 hrs per year = Hourly Rate</small>				

JUSTIFICATION FOR NEW POSITION/SALARY ADJUSTMENT: (Explain why position or adjustment request is essential)

Employee is being re-assigned.

*** POSITION RECLASSIFICATION COMMENTS: (Attach completed Reclassification Analysis Form and additional pages if needed)**

[Signature]
 Department Head
[Signature]
 Department of Human Resources
[Signature]
 Department of Budget & Management

10/26/2016
 Date
11/03/2016
 Date
11/14/2016
 Date