



# HIDALGO COUNTY Personnel Adjustment Request Form



DEPARTMENT NAME/NUMBER: SHERIFF'S OFFICE (280 - 001 )

DATE: 1-12-2017

CURRENT POSITION TITLE: *PR Senior* SR-DEPUTY SHERIFF STEP II

CURRENT SLOT. #: 001-219

REQUESTED POSITION TITLE:  
(For new positions or reclassifications)

**REQUEST FOR:**

- New Position
- Temporary Position
- Position Reclassification\*
- Other Deleting Clothing allowance

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

**POSITION SALARY REQUEST:**

*PR Allowance*  
 Salary Amount: \$ 500.00 *Allowance* Current Budgeted Salary \$ 0 *Allowance* Proposed Budgeted Salary \$ (500.00) 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)

Removing clothing allowance.

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

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

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

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**HUMAN RESOURCES:** Classification and Salary Recommendation

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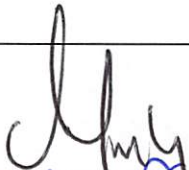
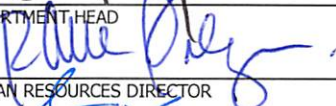

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**BUDGET & MANAGEMENT:** Classification and Salary Recommendation

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1.		1-13-17	FUNDING AVAILABLE IN DEPT. BUDGET	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
	DEPARTMENT HEAD	DATE			
2.		1/19/2019	PERSONNEL PROCEDURES COMPLETED	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
	HUMAN RESOURCES DIRECTOR	DATE			
3.		1/20/17	BUDGET PROCEDURES COMPLETED	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
	DEPARTMENT OF BUDGET & MANAGEMENT	DATE			
4.	COMMISSIONERS COURT APPROVAL	DATE			



# HIDALGO COUNTY Personnel Adjustment Request Form



**DEPARTMENT NAME/NUMBER:** SHERIFF'S OFFICE (280-015) Jail Commissary

**DATE:** 1-12-2017

**CURRENT POSITION TITLE:** CLERK III

**CURRENT SLOT. #:** 015-005

**REQUESTED POSITION TITLE:**  
(For new positions or reclassifications)

**REQUEST FOR:**

- New Position
- Temporary Position
- Position Reclassification\*
- Other Delete

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

**POSITION SALARY REQUEST:**

Salary Amount: \$ 26,958.00 Current Budgeted Salary      \$ Ø Proposed Budgeted Salary      \$ (\$26,958.00) 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.)
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**CIVIL SERVICE:**  
 Exempt       FLSA: Exempt   
 Non-Exempt       Non-Exempt   
 N/A

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

Positions will be delete as part of re-organization.

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

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

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

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**HUMAN RESOURCES:** Classification and Salary Recommendation

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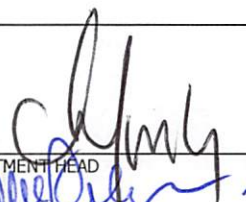
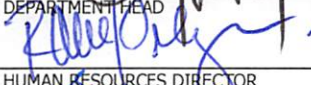
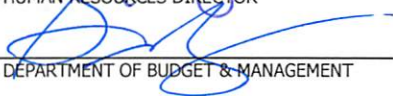
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**BUDGET & MANAGEMENT:** Classification and Salary Recommendation

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1.	 DEPARTMENT HEAD	1-13-17 DATE	FUNDING AVAILABLE IN DEPT. BUDGET	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
2.	 HUMAN RESOURCES DIRECTOR	1/19/2017 DATE	PERSONNEL PROCEDURES COMPLETED	<input type="checkbox"/> YES	<input type="checkbox"/> NO
3.	 DEPARTMENT OF BUDGET & MANAGEMENT	1/20/17 DATE	BUDGET PROCEDURES COMPLETED	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
4.	COMMISSIONERS COURT APPROVAL	DATE			