



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: 04/19/2017 CURRENT POSITION TITLE: Court Coordinator
 DEPARTMENT NAME: JAG CURRENT SLOT NO.: G001
 DEPARTMENT NO.: 115-047 REQUESTED POSITION TITLE: _____

REQUEST FOR: New Position Temporary Position Position Reclassification* Other Change in funding source

SALARY REQUEST: \$ 49,162.00 \$ 0.00 -\$ 49,162.00
 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	Annual Salary / 2080 hrs per year = Hourly Rate		

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

Position and employee transfer to Auxiliary Court.

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

[Signature]
Department Head

04/19/2017
Date

[Signature]
Department of Human Resources

4/21/2017
Date

[Signature]
Department of Budget & Management

4/28/17
Date



COUNTY OF HIDALGO

Human Resources Department



PERSONNEL ADJUSTMENT REQUEST FORM (ALLOWANCES)

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

DATE: 04/19/2017 CURRENT POSITION TITLE: Court Coordinator
 DEPARTMENT NAME: JAG CURRENT SLOT NO.: G001
 DEPARTMENT NO.: 115-047 REQUESTED POSITION TITLE: _____

ALLOWANCE REQUEST: *Type of Allowance*

- Longevity Interpreter Clothing
 Supplemental Auto

Allowance Amount: \$ 900.00 \$ 0.00 -\$ 900.00
 Current Budgeted Amount Proposed Budgeted Amount Net Change

TOTAL BUDGETARY IMPACT: -\$ 900.00

POSITION/ALLOWANCE 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 FLSA: Exempt
 Non-Exempt Non- Exempt

JUSTIFICATION/PRIORITY: (Explain why this allowance request is essential)

Position and employee transfer to Auxiliary Court.

COMMENTS: (Any comments you wish to make regarding this request, attach additional pages if needed)

Department Head

04/19/2017
Date

Department of Human Resources

Date

Department of Budget & Management

4/28/17
Date



COUNTY OF HIDALGO

Human Resources Department



PERSONNEL ADJUSTMENT REQUEST FORM (ALLOWANCES)

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

DATE: 04/19/2017 CURRENT POSITION TITLE: _____
 DEPARTMENT NAME: Auxiliary Court CURRENT SLOT NO.: Proposed 0006
 DEPARTMENT NO.: 045-001 REQUESTED POSITION TITLE: Court Coordinator

ALLOWANCE REQUEST: Type of Allowance

- | | | |
|---|--------------------------------------|-----------------------------------|
| <input checked="" type="checkbox"/> Longevity | <input type="checkbox"/> Interpreter | <input type="checkbox"/> Clothing |
| <input type="checkbox"/> Supplemental | <input type="checkbox"/> Auto | |

Allowance Amount: <u>\$ 0.00</u>	Allowance Amount: <u>\$ 900.00</u>	Allowance Amount: <u>\$ 900.00</u>
Current Budgeted Amount	Proposed Budgeted Amount	Net Change

TOTAL BUDGETARY IMPACT: \$ 900.00

POSITION/ALLOWANCE TO BE FUNDED FROM ONE OF THE FOLLOWING:

- | | | |
|--|--|--|
| <input type="checkbox"/> Current Department Budget | <input type="checkbox"/> Annual Budget Cycle | <input type="checkbox"/> Will Require Additional Funds |
| <input type="checkbox"/> Salary Adjustment | <input type="checkbox"/> 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

JUSTIFICATION/PRIORITY: (Explain why this allowance request is essential)

Position and employee transfer from JAG.

COMMENTS: (Any comments you wish to make regarding this request, attach additional pages if needed)

 Department Head

 Department of Human Resources

 Department of Budget & Management

04/19/2017
 Date
4/21/2017
 Date
4/28/17
 Date