



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: 10/16/2017 CURRENT POSITION TITLE: Public Health Technician I
 DEPARTMENT NAME: Health & Human Services CURRENT SLOT NO.: 0001
 DEPARTMENT NO.: 340 REQUESTED POSITION TITLE: Public Health Technician I

ALLOWANCE REQUEST: Type of Allowance

- Longevity
 Supplemental

- Interpreter
 Auto

- Clothing

Allowance Amount:	<u>\$ 0.00</u>	<u>\$ 7,480.00</u>	
	<small>Current Budgeted Amount</small>	<small>Proposed Budgeted Amount</small>	<small>Net Change</small>

\$ 4,080.00 DT

\$ 4,080.00

TOTAL BUDGETARY IMPACT: \$ 7,480.00

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

- Current Department Budget Annual Budget Cycle Will Require Additional Funds
 Salary Adjustment Other PHHS Program (F1293, Program 070)

- 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)

The Department of State Health Services has requested that exploratory data evaluations for the CCHB program be conducted with program participants through focus groups which will require transcription & translation duties.

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

\$7,480.00 is the total budget for 22 months of program services. \$3,060.00 for 12/01/17 to 08/31/18; \$4,080.00 for 09/01/18 to 08/31/19 and \$340.00 for 09/01/19 to 09/30/19; Based on \$17 / hr for 440 hrs during 22 months.

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

10-16-17
 Date
10/17/2017
 Date
10/19/2017
 Date