



COUNTY OF HIDALGO

DEPARTMENT OF HUMAN RESOURCES

PERSONNEL ADJUSTMENT REQUEST FORM

NOTE: Complete multiple personnel action form if department is requesting more than (3) personnel actions.

Date: 01/11/2018 Current Slot No.: 0422 *fy*
 Department Name: SHERIFF'S OFFICE Current Position Title: SERGEANT STEP I
 Department No.: 280-001 Requested Position Title: SERGEANT STEP II *fy*

REQUEST FOR: New Position Temporary Position* Position Reclassification Other Salary Adjustment

SALARY REQUEST:	<u>\$ 59,795.00</u>	<u>\$ 61,290.00</u>	<u>\$ 1,495.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change
SALARY REQUEST:	<u> </u>	<u> </u>	<u>\$ 0.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change
TOTAL BUDGETARY IMPACT:	<u>\$ 1,495.00</u>		

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

*** TEMPORARY POSITIONS:**

Start Date	End Date	Work Schedule	Hours per Week	No. of Weeks
Annual Salary		Step 1 Salary / 2,080 Hours Per Year = Hourly Rate		Hourly Rate _____
No. of Weeks x Hours per Week = Total Hours x Hourly Rate = Budgeted Salary				

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

Fundings for Sergeant promotion; which current slot number budgeted for step I and employee promoted currently in highest step.

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

1-11-18
 Date
1/17/2018
 Date
1-19-18
 Date

