



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: 07/13/2018 Current Slot No.: 0001
 Department Name: 250-006 Current Position Title: Coordinator I, UCP
 Department No.: Urban County Program Requested Position Title: UCP Coordinator I (250-006) Delete *fy*

REQUEST FOR: New Position Temporary Position* Position Reclassification Other Delete

SALARY REQUEST:	\$ <u>36,455.00</u>	\$ <u>0.00</u>
	\$ 39,369.00	\$ 39,369.00
	Current Budgeted Amount	Proposed Budgeted Amount
		Net Change
SALARY REQUEST:		\$ <u>0.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount
		Net Change
TOTAL BUDGETARY IMPACT:	\$ 39,369.00	

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	No. of Weeks
Annual Salary _____		Hourly Rate _____		
Step 1 Salary / 2,080 Hours Per Year = 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)*

As per the needs of the department, position in not needed.

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

07/16/2018
 Date
7/24/2018
 Date
7/26/18
 Date





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: 07/13/2018 Current Slot No.: 0004 (proposed)
 Department Name: 250-006 Current Position Title: _____
 Department No.: Urban County Program Requested Position Title: Clerk II (250-006)

REQUEST FOR: New Position Temporary Position* Position Reclassification Other _____

SALARY REQUEST:	\$ 0.00	\$ 25,470.00	\$ 25,470.00
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change
SALARY REQUEST:			\$ 0.00
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change
TOTAL BUDGETARY IMPACT:	\$ 25,470.00		

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	No. of Weeks
Annual Salary _____		Hourly Rate _____		
Step 1 Salary / 2,080 Hours Per Year = 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)*

This position is necessary to appropriately meet program requirements.

Maria P. [Signature]
 Department Head
[Signature]
 Department of Human Resources
[Signature]
 Department of Budget & Management

07/16/2018
 Date
7/24/2018
 Date
7/24/18
 Date





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: 07/13/2018 Current Slot No.: 0005 (proposed)
 Department Name: 250-006 Current Position Title: _____
 Department No.: Urban County Program Requested Position Title: Program Specialist I (250-006)

REQUEST FOR: New Position Temporary Position* Position Reclassification Other _____

SALARY REQUEST:	<u>\$ 0.00</u>	<u>\$ 36,455.00</u>	<u>\$ 36,455.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change

SALARY REQUEST:	_____	_____	<u>\$ 0.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change

TOTAL BUDGETARY IMPACT: \$ 36,455.00

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	No. of Weeks
Annual Salary _____		Hourly Rate _____		
Step 1 Salary / 2,080 Hours Per Year = 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)

This position is necessary to appropriately meet program requirements.

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

07/16/2018
 Date
7/25/2018
 Date
7/26/2018
 Date

RECEIVED

JUL 17 2018

DEPARTMENT OF HUMAN RESOURCES