



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: 01/10/2019 Current Slot No.: See Attached
 Department Name: WIC Program Current Position Title: See Attached
 Department No.: 350-001 Requested Position Title: _____

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

SALARY REQUEST:	<u>\$ 89,215.00</u>	<u>\$ 0.00</u>	<u>-\$ 89,215.00</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:	<u>-\$ 89,215.00</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 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)*

These positions will no longer be funded under this grant.

Clayton J
 Department Head
Allye D...
 Department of Human Resources
[Signature]
 Department of Budget & Management

Date 1/7/19
 Date 1/14/2019
 Date 1/14/19

RECEIVED

JAN 14 2019

DEPARTMENT OF HUMAN RESOURCES



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: 01/07/2019 Current Slot No.: See Attached
 Department Name: WIC Program Current Position Title: _____
 Department No.: 350 Requested Position Title: WIC Certification Specialist I

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

SALARY REQUEST:	<u>\$ 82,797.00</u>	<u>\$ 82,797.00</u>
Current Budgeted Amount	Proposed Budgeted Amount	Net Change

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

TOTAL BUDGETARY IMPACT: \$ 82,797.00

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

*** TEMPORARY POSITIONS:**

<u> </u> Start Date	<u> </u> End Date	<u> </u> Work Schedule	<u> </u> Hours per Week	<u> </u> No. of Weeks
Annual Salary <u> </u>			Hourly Rate <u> </u>	
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 needed to meet department needs.

[Signature]
Department Head

[Signature]
Department of Human Resources

[Signature]
Department of Budget & Management

01/07/2019
Date

1/09/2019
Date

1/14/19
Date



