



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: 11/20/2020 Current Slot No.: 0025 (proposed) kg
 Department Name: Health & Human Services Current Position Title: _____
 Department No.: 340 - Program 076 Requested Position Title: COVID-19 Public Health Specialist I

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

SALARY REQUEST:	<u>\$ 0.00</u>	<u>\$ 37,548.00</u>	<u>\$ 37,548.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change
SALARY REQUEST:	<u>\$ 0.00</u>	<u>\$ 0.00</u>	<u>\$ 0.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change
TOTAL BUDGETARY IMPACT:	<u>\$ 37,548.00</u>		

POSITION TO BE FUNDED FROM ONE OF THE FOLLOWING:

Current Department Budget Annual Budget Cycle Will Require Additional Funds
 Salary Adjustment Other Fund 1293, Program 076

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

PR

*** 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)*

100% Grant Funded. Will provide clinical and administrative support to COVID-19 preparedness & response. Will support planning and documentation initiatives in regards to emergency operations, mitigation and recovery efforts for COVID-19. Will make field visits to surveillance sites to collect kits and related supplies for COVID-19 samplings.

Eduardo Olivarez Miguel Guzman 11/20/2020
 Department Head Date
[Signature] 11/20/2020
 Department of Human Resources Date
[Signature] 11/20/2020
 Department of Budget & Management 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: 11/20/2020 Current Slot No.: 0026 (proposed) K3
 Department Name: Health & Human Services Current Position Title: _____
 Department No.: 340 - Program 076 Requested Position Title: COVID-19 Public Health Specialist I

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

SALARY REQUEST:	<u>\$ 0.00</u>	<u>\$ 37,548.00</u>	<u>\$ 37,548.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change
SALARY REQUEST:	<u>\$ 0.00</u>	<u>\$ 0.00</u>	<u>\$ 0.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change
TOTAL BUDGETARY IMPACT:	<u>\$ 37,548.00</u>		

POSITION TO BE FUNDED FROM ONE OF THE FOLLOWING:

Current Department Budget Annual Budget Cycle Will Require Additional Funds
 Salary Adjustment Other Fund 1293, Program 076

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

PR

*** 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)*

100% Grant Funded. Will provide clinical and administrative support to COVID-19 preparedness & response. Will support planning and documentation initiatives in regards to emergency operations, mitigation and recovery efforts for COVID-19. Will make field visits to surveillance sites to collect kits and related supplies for COVID-19 samplings.

<u>Eduardo Olivarez</u> Department Head <u>[Signature]</u> Department of Human Resources <u>[Signature]</u> Department of Budget & Management	<u>11/20/2020</u> Date <u>11/20/2020</u> Date <u>11/20/2020</u> Date
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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: 11/20/2020 Current Slot No.: 0027 (proposed) ky
 Department Name: Health & Human Services Current Position Title: _____
 Department No.: 340 - Program 076 Requested Position Title: COVID-19 Public Health Specialist I

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

SALARY REQUEST:	<u>\$ 0.00</u>	<u>\$ 37,548.00</u>	<u>\$ 37,548.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change
SALARY REQUEST:	<u>\$ 0.00</u>	<u>\$ 0.00</u>	<u>\$ 0.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change
TOTAL BUDGETARY IMPACT:	<u>\$ 37,548.00</u>		

POSITION TO BE FUNDED FROM ONE OF THE FOLLOWING:

Current Department Budget Annual Budget Cycle Will Require Additional Funds
 Salary Adjustment Other Fund 1293, Program 076

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

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Eduardo Olivarez Miguel Escamilla 11/20/2020
 Department Head Date
[Signature] 11/20/2020
 Department of Human Resources Date
[Signature] 11/20/2020
 Department of Budget & Management 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: 11/20/2020 Current Slot No.: 00284 (proposed) kg
 Department Name: Health & Human Services Current Position Title: _____
 Department No.: 340 - Program 076 Requested Position Title: COVID-19 Public Health Specialist I

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

SALARY REQUEST:	<u>\$ 0.00</u>	<u>\$ 37,548.00</u>	<u>\$ 37,548.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change
SALARY REQUEST:	<u>\$ 0.00</u>	<u>\$ 0.00</u>	<u>\$ 0.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change
TOTAL BUDGETARY IMPACT:	<u>\$ 37,548.00</u>		

POSITION TO BE FUNDED FROM ONE OF THE FOLLOWING:

Current Department Budget Annual Budget Cycle Will Require Additional Funds
 Salary Adjustment Other Fund 1293, Program 076

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

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Eduardo Olivarez Miguel Escamilla 11/20/2020
 Department Head Date
[Signature] 11/20/2020
 Department of Human Resources Date
[Signature] 11/20/2020
 Department of Budget & Management Date