



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: 01/06/2021 Current Slot No.: 0001-0002
 Department Name: SHERIFF'S OFFICE Current Position Title: ~~Crime~~ ^{criminal} Research Specialist
 Department No.: 280-005 Requested Position Title: _____

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

SALARY REQUEST:	<u>\$ 45,329.00</u>	<u>\$ 0.00</u>	<u>-\$ 45,329.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change
SALARY REQUEST:	<u>\$ 45,329.00</u>	<u>\$ 0.00</u>	<u>-\$ 45,329.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change
TOTAL BUDGETARY IMPACT:	<u>-\$ 90,658.00</u>		

POSITION TO BE FUNDED FROM ONE OF THE FOLLOWING:

Current Department Budget Annual Budget Cycle Will Require Additional Funds
 Salary Adjustment Other Positions to be deleted.

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 122 120

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)

Positions to be deleted.

[Signature]
Department Head

[Signature]
Department of Human Resources

[Signature]
Department of Budget & Management

1-6-21
Date

1/13/21
Date

1/14/2021
Date

