



# 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: 05/14/2021 Current Slot No.: 0027 (proposed)  
 Department Name: Precinct 2 Administration Current Position Title: \_\_\_\_\_  
 Department No.: 122 -005 Requested Position Title: Program Manager I

REQUEST FOR:  New Position  Temporary Position\*  Position Reclassification  Other \_\_\_\_\_

<b>SALARY REQUEST:</b>	<u>\$ 0.00</u> Current Budgeted Amount	<u>\$ 51,084.00</u> Proposed Budgeted Amount	<u>\$ 51,084.00</u> Net Change
<b>SALARY REQUEST:</b>	<u>\$ 0.00</u> Current Budgeted Amount	<u>\$ 0.00</u> Proposed Budgeted Amount	<u>\$ 0.00</u> Net Change
<b>TOTAL BUDGETARY IMPACT:</b>	<u>\$ 51,084.00</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 _____		Hourly Rate _____		
Step 1 Salary / 2,080 Hours Per Year = Hourly Rate				
$\text{No. of Weeks} \times \text{Hours per Week} = \text{Total Hours} \times \text{Hourly Rate} = \text{Budgeted Salary}$				

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

Pct 2 Re-Organization plan.

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\_\_\_\_\_

\_\_\_\_\_

Erick Zamora  
 Department Head

[Signature]  
 Department of Human Resources

[Signature]  
 Department of Budget & Management

5.14.21  
 Date

5/17/21  
 Date

05/17/2021  
 Date