



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: 05/28/2021 Current Slot No.: 0007
 Department Name: HIDALGO COUNTY PCT.4 Current Position Title: ADMINISTRATIVE ASSISTANT IV
 Department No.: 124-005 Requested Position Title: _____

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

SALARY REQUEST:	<u>\$ 40,552.00</u>	_____	<u>-\$ 40,552.00</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>-\$ 40,552.00</u>		

POSITION TO BE FUNDED FROM ONE OF THE FOLLOWING:

<input type="checkbox"/> Current Department Budget	<input type="checkbox"/> Annual Budget Cycle	<input type="checkbox"/> Will Require Additional Funds
<input type="checkbox"/> Salary Adjustment	<input checked="" type="checkbox"/> Other <u>FUNDS FROM DELETED POSITIONS</u>	

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)*

POSITION NO LONGER NEEDED.

<p><u>Ellie Torres jmc</u> Department Head</p> <p><u>[Signature]</u> Department of Human Resources</p> <p><u>[Signature]</u> Department of Budget & Management</p>	<p><u>5/28/21</u> Date</p> <p><u>5/28/21</u> Date</p> <p><u>06/01/2021</u> Date</p>
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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: 05/28/2021 Current Slot No.: 0011
 Department Name: HIDALGO COUNTY PCT.4 Current Position Title: CLERK III
 Department No.: 124-005 Requested Position Title: _____

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

SALARY REQUEST:	<u>\$ 27,599.00</u>	_____	_____
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change
			-\$ 27,599.00
SALARY REQUEST:	_____	_____	_____
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change
			\$ 0.00
TOTAL BUDGETARY IMPACT:	- \$ 27,599.00		

POSITION TO BE FUNDED FROM ONE OF THE FOLLOWING:

Current Department Budget Annual Budget Cycle Will Require Additional Funds
 Salary Adjustment Other FUNDS FROM DELETED POSITIONS

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)

POSITION NO LONGER NEEDED.

Ellie Torres
 Department Head

5/28/21
 Date

[Signature]
 Department of Human Resources

5/28/21
 Date

[Signature]
 Department of Budget & Management

06/01/2021
 Date

