



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: 01/04/2022 Current Slot No.: 0001
 Department Name: Health & Human Services Current Position Title: Community Health Worker
 Department No.: 340 - 074 Requested Position Title: _____

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

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

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

TOTAL BUDGETARY IMPACT: -\$ 27,599.00

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 type="checkbox"/> 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)*

Grant program has ended; No additional funds.

Eduardo Olivarez
 Department Head

01/04/2022
 Date

[Signature]
 Department of Human Resources

1/6/22
 Date

 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: 01/04/2022 Current Slot No.: 0002
 Department Name: Health & Human Services Current Position Title: Community Health Worker
 Department No.: 340 - 074 Requested Position Title: _____

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

| | | | |
|--------------------------------|-------------------------|--------------------------|----------------------|
| SALARY REQUEST: | <u>\$ 27,599.00</u> | <u>\$ 0.00</u> | <u>-\$ 27,599.00</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>-\$ 27,599.00</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 | | | | |
| 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)*

Grant program has ended; No additional funds.

Eduardo Olivarez
 Department Head

 Department of Human Resources

01/04/2022
 Date
1/6/22
 Date

 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: 01/04/2022 Current Slot No.: 0009
 Department Name: Health & Human Services Current Position Title: Licensed Vocational Nurse III
 Department No.: 340 - 074 Requested Position Title: _____

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

| | | | |
|--------------------------------|-------------------------|--------------------------|----------------------|
| SALARY REQUEST: | <u>\$ 51,085.00</u> | <u>\$ 0.00</u> | <u>-\$ 51,085.00</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>-\$ 51,085.00</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)*

Grant program has ended; No additional funds.

Eduardo Olivarez
 Department Head
 Department of Human Resources

01/04/2022
 Date
1/6/22
 Date

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: 01/04/2022 Current Slot No.: 0011
 Department Name: Health & Human Services Current Position Title: Zika Grant Manager
 Department No.: 340 - 074 Requested Position Title: _____

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

| | | | |
|--------------------------------|-------------------------|--------------------------|----------------------|
| SALARY REQUEST: | <u>\$ 55,171.00</u> | <u>\$ 0.00</u> | <u>-\$ 55,171.00</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>-\$ 55,171.00</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 _____ | | 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)*

Grant program has ended; No additional funds.

Eduardo Olivarez
 Department Head
[Signature]
 Department of Human Resources

01/04/2022
 Date
1/6/22
 Date

 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: 01/04/2022 Current Slot No.: 0007 / 0089
 Department Name: Health & Human Services Current Position Title: TB Assistant Records Manager
 Department No.: 340 - 011 | 340-003 Requested Position Title: _____

| | | | |
|--|---|--|---|
| REQUEST FOR: <input checked="" type="checkbox"/> New Position <u>340-011-007</u> SALARY REQUEST: <u>\$26,084.25</u> Current Budgeted Amount: <u>\$29,325.00</u> | <input type="checkbox"/> Temporary Position* <u>\$26,084.25</u> Current Budgeted Amount: <u>\$29,325.00</u> | <input type="checkbox"/> Position Reclassification \$ 0.00 Proposed Budgeted Amount: _____ | <input checked="" type="checkbox"/> Other DELETE <u>- \$26,084.25</u> Net Change: <u>- \$29,325.00</u> |
| <u>340-003-0089</u> SALARY REQUEST: <u>\$3,240.75</u> Current Budgeted Amount: _____ | <u>\$3,240.75</u> Current Budgeted Amount: _____ | \$ 0.00 Proposed Budgeted Amount: _____ | \$ 0.00 - <u>\$3,240.75</u> Net Change: _____ |
| TOTAL BUDGETARY IMPACT: <u>-\$ 29,325.00</u> | | | |

POSITION TO BE FUNDED FROM ONE OF THE FOLLOWING:

Current Department Budget Annual Budget Cycle Will Require Additional Funds
 Salary Adjustment Other Grant program budget constraints

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 | | Step 1 Salary / 2,080 Hours Per Year = Hourly Rate | | 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)*

As a result of grant program budget constraints, this position cannot continue.

Eduardo Olivarez
 Department Head
[Signature]
 Department of Human Resources

01/04/2022
 Date
1/6/22
 Date

Department of Budget & Management _____ Date _____