



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: 05/10/2022 Current Slot No.: ~~0116~~ 0028 KJ
 Department Name: Precinct 2 Current Position Title: _____
 Department No.: 122-006 005 Requested Position Title: Assistant Chief of Staff II

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

| | | | |
|--------------------------------|-------------------------|--------------------------|---------------------|
| SALARY REQUEST: | <u>\$ 0.00</u> | <u>\$ 81,065.00</u> | <u>\$ 81,065.00</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>\$ 81,065.00</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)

Precinct 2 has a need for an Assistant Chief of Staff II. This position will be responsible for overseeing office personnel.

EJAC

Department Head _____
 Department of Human Resources _____
 Department of Budget & Management _____

5-11-22

Date _____
5/10/22
 Date _____
5/13/22
 Date _____



COUNTY OF HIDALGO

DEPARTMENT OF HUMAN RESOURCES

PERSONNEL ADJUSTMENT REQUEST FORM (ALLOWANCES)

NOTE: Complete multiple personnel action form if department is requesting more than (3) personnel actions.

Date: 05/10/2022 Current Slot No.: 0116 0028 428
 Department Name: Precinct 2 Current Position Title: _____
 Department No.: 122-006 005 Requested Position Title: Assistant Chief of Staff II

ALLOWANCE REQUEST: Type of Allowance

Position
 Interpreter
 Clothing
 Supplemental
 Auto

| | | | |
|--------------------------|-------------------------|--------------------------|-------------|
| ALLOWANCE AMOUNT: | \$ 0.00 | \$ 5,000.00 | \$ 5,000.00 |
| <i>Auto</i> | Current Budgeted Amount | Proposed Budgeted Amount | Net Change |

| | | | |
|--------------------------|-------------------------|--------------------------|-------------|
| ALLOWANCE AMOUNT: | \$ 0.00 | \$ 9,000.00 | \$ 9,000.00 |
| <i>Supplemental</i> | Current Budgeted Amount | Proposed Budgeted Amount | Net Change |

TOTAL BUDGETARY IMPACT: \$ 14,000.00

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

JUSTIFICATION / PRIORITY: *(Explain why this allowance request is essential)*

Position is responsible for management of additional duties to include intergovernment relations and projects.

COMMENTS: *(Any comments you wish to make regarding this request, attach additional pages if needed)*

[Signature]

Department Head

[Signature]

Department of Human Resources

[Signature]

Department of Budget & Management

5-11-22

Date

5/10/22

Date

5/14/22

Date



COUNTY OF HIDALGO

DEPARTMENT OF HUMAN RESOURCES

PERSONNEL ADJUSTMENT REQUEST FORM (ALLOWANCES)

NOTE: Complete multiple personnel action form if department is requesting more than (3) personnel actions.

Date: 05/11/2022 Current Slot No.: 0018
 Department Name: Precinct 2 Current Position Title: Director of Administration
 Department No.: 122-005 Requested Position Title: Director of Administration

ALLOWANCE REQUEST: *Type of Allowance*

Position Interpreter Clothing Supplemental Auto

| | | | |
|-------------|----------------------------------|--------------------------|--------------------|
| <i>Auto</i> | ALLOWANCE AMOUNT: <u>\$ 0.00</u> | <u>\$ 5,000.00</u> | <u>\$ 5,000.00</u> |
| | Current Budgeted Amount | Proposed Budgeted Amount | Net Change |

| | | | |
|---------------------|----------------------------------|--------------------------|--------------------|
| <i>Supplemental</i> | ALLOWANCE AMOUNT: <u>\$ 0.00</u> | <u>\$ 9,000.00</u> | <u>\$ 9,000.00</u> |
| | Current Budgeted Amount | Proposed Budgeted Amount | Net Change |

TOTAL BUDGETARY IMPACT: \$ 14,000.00

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 *By*

JUSTIFICATION / PRIORITY: *(Explain why this allowance request is essential)*

Position is responsible for management of additional duties to include intergovernmental relations and projects.

COMMENTS: *(Any comments you wish to make regarding this request, attach additional pages if needed)*

[Signature]
 Department Head

5-11-22
 Date

[Signature]
 Department of Human Resources

5/12/22
 Date

[Signature]
 Department of Budget & Management

5/13/22
 Date