



COUNTY OF HIDALGO

DEPARTMENT OF HUMAN RESOURCES

RECEIVED
NOV 16 2022
DEPARTMENT OF HUMAN RESOURCES

PERSONNEL ADJUSTMENT REQUEST FORM

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

Date: 11/15/2022 Current Slot No.: 017-0010 / 0002
 Department Name: WIC Program Current Position Title: Registered Nurse Consultant IBCL
 Department No.: 350 - 017/350-018 Requested Position Title: _____

REQUEST FOR:	<input type="checkbox"/> New Position	<input type="checkbox"/> Temporary Position*	<input type="checkbox"/> Position Reclassification	<input checked="" type="checkbox"/> Other	<u>Delete</u>
<u>350-017-0010</u> SALARY REQUEST:	\$ 37,530.00	\$ 0.00	-\$ 37,530.00		
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change		
<u>350-018-0002</u> SALARY REQUEST:	\$37,530.00	\$ 0.00	- \$37,530.00		
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change		

TOTAL BUDGETARY IMPACT: -\$37,530.00 \$75,060.00

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 **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)

Position no longer needed.

Clayton J
Department Head
[Signature]
Department of Human Resources

11/15/2022
Date
11/18/22
Date



COUNTY OF HIDALGO

DEPARTMENT OF HUMAN RESOURCES

NOV 16 2022

PERSONNEL ADJUSTMENT REQUEST FORM

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

Date: 11/15/2022 Current Slot No.: 0008/0011
 Department Name: WIC Program Current Position Title: _____
 Department No.: 350-0018/350-0017 Requested Position Title: Registered Dietitian IBCLC

REQUEST FOR:	<input checked="" type="checkbox"/> New Position	<input type="checkbox"/> Temporary Position*	<input type="checkbox"/> Position Reclassification	<input type="checkbox"/> Other
	<u>350-018-0008</u>			
SALARY REQUEST:	<u>\$0.00</u>	<u>\$27,585.50</u>	<u>\$27,585.50</u>	<u>\$27,585.50</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Proposed Budgeted Amount	Net Change
		<u>\$27,586.00</u>	<u>\$27,585.50</u>	<u>\$27,586.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Proposed Budgeted Amount	Net Change
				<u>\$27,585.50</u>
				Net Change

TOTAL BUDGETARY IMPACT: \$ 55,171.00

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 **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		
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 needed to meet needs for our Lactation Care Center.

Claudia J
 Department Head

11/15/2022
 Date

[Signature]
 Department of Human Resources

11/18/22
 Date