



# COUNTY OF HIDALGO

## DEPARTMENT OF HUMAN RESOURCES

### POSITION TITLE CHANGE ONLY REQUEST FORM

**NOTE:** Complete this form to correct the position title of an employee based on the employee's assigned duties and responsibilities. A position title change does not involve a change in duties or responsibilities nor a change in salary.

Date: 06/06/2025

Employee Name: \_\_\_\_\_

Employee No.: 200905

Department Name: Tax Office

Department No.: 140-004 / 140-003

Current Position Title: Scofflaw Technician IV

Requested Position Title: ~~Scofflaw~~ Monitor I *28*

#### EXPLANATION OF TITLE CHANGE: *(Briefly explain why the title change is needed)*

To align with actual duties. Enforcing, monitoring, and auditing scofflaw program; gathering, compiling, and analyzing information on Scofflaw related issues for preparation of required Scofflaw reports and budgets; prepares and reconciles Scofflaw Billing Statements for municipalities, as well as receive/receipt payments collected from municipalities

#### DEPARTMENT OF HUMAN RESOURCES: *(Recommendations)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Attach a list of duties and responsibilities assigned to the employee. (DO NOT ATTACH A JOB DESCRIPTION)

  
Elected Official / Department Head

06/06/2025  
Date