



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: 08/11/2026 Current Slot No.: 2200154
Department Name: Facilities Management Current Position Title: _____
Department No.: 0220 Requested Position Title: Custodian II

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

SALARY REQUEST: Current Budgeted Amount \$ 30,684.00 \$ 30,684.00
Proposed Budgeted Amount Net Change

SALARY REQUEST: Current Budgeted Amount Proposed Budgeted Amount \$ 0.00
Net Change

TOTAL BUDGETARY IMPACT: \$ 30,684.00

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

*** 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)

Department Head

Department of Human Resources

Date

Date