**POSITION ADJUSTMENT REQUEST**

 NO. 21229

DATE 10/21/2012

Department No./

Department Human Resource Budget Unit No. 0035 Org No. 1315 Agency No. 05

Action Requested: Exempt the classification of Labor Relations Manager (AGD1) from the Merit System in the Human Resource Department.

Proposed Effective Date: 1/23/2013

Classification Questionnaire attached: Yes [ ]  No [x]  / Cost is within Department’s budget: Yes [x]  No [ ]

Total One-Time Costs (non-salary) associated with request:  $0.00

Estimated total cost adjustment (salary / benefits / one time):

Total annual cost $0.00 Net County Cost $0.00

Total this FY $0.00 N.C.C. this FY $0.00

SOURCE OF FUNDING TO OFFSET ADJUSTMENT N/A

Department must initiate necessary adjustment and submit to CAO.

Use additional sheet for further explanations or comments.

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

 (for) Department Head

REVIEWED BY CAO AND RELEASED TO HUMAN RESOURCES DEPARTMENT

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

 Deputy County Administrator Date

HUMAN RESOURCES DEPARTMENT RECOMMENDATIONS DATE 10/21/2012

ADOPT Ordinance NO. 2012-13 amending Section 33-5.413 of the County Ordinance Code to Exempt from the Merit System the classification of Labor Relations Manager-Exempt

Amend Resolution 71/17 establishing positions and resolutions allocating classes to the Basic / Exempt salary schedule.

Effective: [x]  Day following Board Action.

 [ ]       (Date)

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

 (for) Director of Human Resources Date

COUNTY ADMINISTRATOR RECOMMENDATION: DATE

[ ]  Approve Recommendation of Director of Human Resources

[ ]  Disapprove Recommendation of Director of Human Resources

[ ]  Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (for) County Administrator

BOARD OF SUPERVISORS ACTION: David J. Twa, Clerk of the Board of Supervisors

Adjustment is APPROVED [ ]  DISAPPROVED [ ]  and County Administrator

DATE       BY

APPROVAL OF THIS ADJUSTMENT CONSTITUTES A PERSONNEL / SALARY RESOLUTION AMENDMENT

POSITION ADJUSTMENT ACTION TO BE COMPLETED BY HUMAN RESOURCES DEPARTMENT FOLLOWING BOARD ACTION

Adjust class(es) / position(s) as follows:

P300 (M347) Rev 3/15/01

**REQUEST FOR PROJECT POSITIONS**

Department       Date 9/12/2012 No.

1. Project Positions Requested:

2. Explain Specific Duties of Position(s)

3. Name / Purpose of Project and Funding Source (do not use acronyms i.e. SB40 Project or SDSS Funds)

4. Duration of the Project: Start Date       End Date

 Is funding for a specified period of time (i.e. 2 years) or on a year-to-year basis? Please explain.

5. Project Annual Cost

a. Salary & Benefits Costs:        b. Support Costs:

 (services, supplies, equipment, etc.)

c. Less revenue or expenditure:        d. Net cost to General or other fund:

6. Briefly explain the consequences of not filling the project position(s) in terms of:

a. potential future costs d. political implications

b. legal implications e. organizational implications

c. financial implications

7. Briefly describe the alternative approaches to delivering the services which you have considered. Indicate why these alternatives were not chosen.

8. Departments requesting new project positions must submit an updated cost benefit analysis of each project position at the halfway point of the project duration. This report is to be submitted to the Human Resources Department, which will forward the report to the Board of Supervisors. Indicate the date that your cost / benefit analysis will be submitted

9. How will the project position(s) be filled?

[ ]  a. Competitive examination(s)

[ ]  b. Existing employment list(s) Which one(s)?

[ ]  c. Direct appointment of:

[ ]  1. Merit System employee who will be placed on leave from current job

[ ]  2. Non-County employee

Provide a justification if filling position(s) by C1 or C2

USE ADDITIONAL PAPER IF NECESSARY