## **POSITION ADJUSTMENT REQUEST**

NO. <u>21556</u> DATE <u>11/12/2014</u>

	ent No./				
Department Employment and Human Services Dept. Budget	Department Employment and Human Services Dept. Budget Unit No. 0502 Org No. 5216 Agency No. A19				
Action Requested: Add eighteen (18) Social Casework Specialist II (X0VB) (represented) positions in the Children and Families Services Bureau of the Employment and Human Services Department. [ASSIST 31402]					
	Proposed Effective Date: <u>12/</u>	<u>3/2014</u>			
Classification Questionnaire attached: Yes $\Box$ No $\boxtimes$ / Cost is	within Department's budget: Yes 🖂	No 🗌			
Total One-Time Costs (non-salary) associated with request: \$0.0	0				
Estimated total cost adjustment (salary / benefits / one time):	_				
	Net County Cost <u>\$0.00</u>				
	N.C.C. this FY \$0.00				
SOURCE OF FUNDING TO OFFSET ADJUSTMENT $45\%$ Fede					
Department must initiate necessary adjustment and submit to CAO. Use additional sheet for further explanations or comments.					
	Michelle F	regoso			
	(for) Departr	ment Head			
REVIEWED BY CAO AND RELEASED TO HUMAN RESOURCES DEPARTMENT					
	Kevin J. Corrigan	11/13/2014			
C	eputy County Administrator	Date			
HUMAN RESOURCES DEPARTMENT RECOMMENDATIONS       DATE <u>12/4/2014</u> ADD eighteen (18) Social Casework Specialist II (X0VB) (represented) positions, and allocate to salary schedule 255 1618         (\$5,363 - \$6,519) in the Children and Family Services Bureau of the Employment and Human Services Department.					
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P300 (M347) Rev 3/15/01

## **REQUEST FOR PROJECT POSITIONS**

Department		Date <u>1/12/2015</u>	No. <u>xxxxxx</u>	
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.	<ol> <li>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.</li> </ol>			
5.	Project Annual Cost			
	a. Salary & Benefits Costs:	b. Support Costs: (services, supplies, equ	uipment, etc.)	
	c. Less revenue or expenditure:	d. Net cost to Genera	al or other fund:	
6.	Briefly explain the consequences of not filling a. potential future costs b. legal implications c. financial implications	g the project position(s) in terms of: d. political implications e. organizational 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