## **POSITION ADJUSTMENT REQUEST**

NO. <u>21613</u> DATE <u>12/12/2014</u>

Department No./
Budget Unit No. <u>0620</u> Org No. <u>3702</u> Agency No. <u>85</u>

Department County Library	Budget Un	it No. <u>0620</u> Or	g No. <u>3702</u> Agen	cy No. <u>85</u>
Action Requested: Cancel One Full-Time Sr. Communit Community and Media Relations Coordinator in the Libra			and Add One Ful	l-time Departmental
		Proposed	Effective Date:	7/1/2015
Classification Questionnaire attached: Yes ☐ No ☒ /	Cost is wit	hin Departmen	t's budget: Yes ∑	☑ No □
Total One-Time Costs (non-salary) associated with reque	est: \$0.00		-	
Estimated total cost adjustment (salary / benefits / one til	<u> </u>			
Total annual cost (\$31,893.00)	,	et County Cost	\$0.00	
Total this FY \$0.0		C.C. this FY	\$0.00	
SOURCE OF FUNDING TO OFFSET ADJUSTMENT C			*****	
<u></u>		_		
Department must initiate necessary adjustment and submit to 0	CAO.			
Use additional sheet for further explanations or comments.			loccies	ı A. Hudson
		_	Jessica	A. Huuson
			(for) Dep	artment Head
DEVIEWED BY CAO AND BELEASED TO HUMAN DES	COUDCES		F	
REVIEWED BY CAO AND RELEASED TO HUMAN RES	SOURCES	DEPARTMEN	l	
		BR for J	ΙE	2/10/15
	Dep	outy County Ad	ministrator	Date
HUMAN RESOURCES DEPARTMENT RECOMMENDA Cancel one (1) full-time Senior Community Library Mana full-time Departmental Community and Media Relations (	ger (3AGH) Coordinator	(ADSH) (unre	vacant position Noresented)	ATE <u>3/3/2015</u> lo. 14625 and add one (1)
Amend Resolution 71/17 establishing positions and resolutions allocating classes Effective: Day following Board Action.  [(Date)	s to the Basic / E	xempt salary schedu	le.	
	(for)	Director of Hun	nan Resources	Date
COUNTY ADMINISTRATOR RECOMMENDATION:  Approve Recommendation of Director of Human Res	sources		DATE	<u>2/24/2015</u>
☐ Disapprove Recommendation of Director of Human Re☐ Other:		/s/ Julie DiMaggio Enea		
			(for) Co	unty Administrator
BOARD OF SUPERVISORS ACTION: Adjustment is APPROVED DISAPPROVED		Davi		the Board of Supervisors nty Administrator
DATE		BY _		
APPROVAL OF THIS ADJUSTMENT CONSTITU	JTES A PEF	RSONNEL / SA	LARY RESOLUT	ION AMENDMENT
POSITION ADJUSTMENT ACTION TO BE COMPLETED BY I	HUMAN RES	SOURCES DEPA	ARTMENT FOLLOV	VING BOARD ACTION

P300 (M347) Rev 3/15/01

## **REQUEST FOR PROJECT POSITIONS**

De	partment Date <u>2/24/2015</u> No. <u>xxxxx</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.	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 b. legal implications c. financial implications d. political 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