## **POSITION ADJUSTMENT REQUEST**

NO. <u>21634</u> DATE <u>2/24/2015</u>

|   | Department No./                           | DA  | TE <u>2/24/2015</u>      |  |
|---|---|---|--------------------------|--|
| Department County Library Budget Unit No. 0620 Org No. 3718 Agency No. 85   |   |   |                          |  |
| Action Requested: Cancel one 40/40 Library Assistant-<br>Department, Technical Services Division.   | Advanced Level position and               | add one 40/40 I   | _ibrarian in the Library |  |
|   | Proposed                                  | Effective Date: 4   | /1/2015                  |  |
| Classification Questionnaire attached: Yes 🗌 No 🖂   | •   |   |                          |  |
| Total One-Time Costs (non-salary) associated with requ  |   | budget. Tes 🖂   |                          |  |
| Estimated total cost adjustment (salary / benefits / one t  |   |   |                          |  |
| Total annual cost \$7,062.00  | Net County Cost §                         | 0.00  |                          |  |
| Total this FY $$1,765.50$   |   | 60.00   |                          |  |
| SOURCE OF FUNDING TO OFFSET ADJUSTMENT  |   | <u>, , , , , , , , , , , , , , , , , , , </u>                             |                          |  |
| Department must initiate necessary adjustment and submit to Use additional sheet for further explanations or comments.  | CAO.                                      |   |                          |  |
|   |   | Jessica   | a Hudson                 |  |
|   |   | (for) Depa  | rtment Head              |  |
| REVIEWED BY CAO AND RELEASED TO HUMAN RE  | SOURCES DEPARTMENT                        |   |                          |  |
|   |   |   | 0 / <b>-</b> / -         |  |
|   | BR for JE                                 |   | 3/17/15                  |  |
|   | Deputy County Adm                         | inistrator  | Date                     |  |
| HUMAN RESOURCES DEPARTMENT RECOMMEND.<br>Cancel one (1) Library Assistant-Advanced Level (3KTE<br>QXX 1234 (\$3,657 - \$4,670) and add one (1) Librarian<br>(\$4,066 \$5,192) | 3) (represented) vacant position          | on No. 6063 at s  |                          |  |
| Amend Resolution 71/17 establishing positions and resolutions allocating class<br>Effective: Day following Board Action.  | es to the Basic / Exempt salary schedule. |   |                          |  |
|   | (for) Director of Huma                    | n Resources   | Date                     |  |
| COUNTY ADMINISTRATOR RECOMMENDATION:<br>Approve Recommendation of Director of Human Re<br>Disapprove Recommendation of Director of Human<br>Other:                            | SOURCES                                   | DATE  | <u>3/24/2015</u>         |  |
|   |   | /s/ Julie DiMaggio Enea   |                          |  |
|   |   | (for) Cou   | inty Administrator       |  |
| BOARD OF SUPERVISORS ACTION:<br>Adjustment is APPROVED DISAPPROVED  | David                                     | vid J. Twa, Clerk of the Board of Supervisors<br>and County Administrator |                          |  |
| DATE  |   |   |                          |  |
|   | BY  |   |                          |  |
| APPROVAL OF THIS ADJUSTMENT CONSTIT   |   |   | ON AMENDMENT             |  |

P300 (M347) Rev 3/15/01

## **REQUEST FOR PROJECT POSITIONS**

| De | partment  | Date <u>3/24/2015</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. | I. Duration of the Project: Start Date End Date<br>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:<br>(services, supplies, equ   | uipment, etc.)    |  |  |
|    | c. Less revenue or expenditure:   | d. Net cost to Genera   | al or other fund: |  |  |
| 6. | •   | the project position(s) in terms of:<br>I. political implications<br>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