POSITION ADJUSTMENT REQUEST

NO. <u>21743</u> DATE <u>8/31/2015</u>

Department HEALTH SERVICES-HazMat	Department N		g No. <u>5879</u> Aç	nency No. A	<u>.==</u> 18
Action Requested: Add one Clerical Supervisor (JWHF #7030 in the Hazardous Materials Programs division of) position and ca	ancel vacar	nt Clerk-Senior		
5		•	d Effective Date	e: 9/16/2015	5
Classification Questionnaire attached: Yes ☐ No ☒	/ Cost is within	•			
Total One-Time Costs (non-salary) associated with requ		•	J		
Estimated total cost adjustment (salary / benefits / one t	<u></u> -				
Total annual cost \$20,153.70	•	ounty Cost	\$0.00		
Total this FY \$16,794.75		. this FY	\$0.00		
SOURCE OF FUNDING TO OFFSET ADJUSTMENT				<u>es</u>	
Department must initiate necessary adjustment and submit to	CAO.				
Use additional sheet for further explanations or comments.			Krist	en Cunningha	ım
		(for) Department He			lead
REVIEWED BY CAO AND RELEASED TO HUMAN RE	SOURCES DE	PARTMEN	Γ		
		Enid Mend	doza		9/8/2015
	Deputy	County Ad	ministrator		Date
HUMAN RESOURCES DEPARTMENT RECOMMEND. Exempt from Human Resources review under a delegate				_	
Amend Resolution 71/17 establishing positions and resolutions allocating classe Effective: Day following Board Action. [es to the Basic / Exem	pt salary schedu	le.		
	(for) Dire	ector of Hun	nan Resources		Date
COUNTY ADMINISTRATOR RECOMMENDATION: Approve Recommendation of Director of Human Re	sources		DATE	9/8/	/ <u>2015</u>
☐ Disapprove Recommendation of Director of Human Ro ☐ Other: Approve as requested by the department		_	Enid Mendoza		
		(for) County Administrator			inistrator
BOARD OF SUPERVISORS ACTION: Adjustment is APPROVED DISAPPROVED		David J. Twa, Clerk of the Board of Supervisors and County Administrator			
DATE		BY _			
APPROVAL OF THIS ADJUSTMENT CONSTIT	UTES A PERSO	ONNEL / SA	LARY RESOL	UTION AME	NDMENT
POSITION ADJUSTMENT ACTION TO BE COMPLETED BY Adjust class(es) / position(s) as follows:	HUMAN RESOU	RCES DEPA	ARTMENT FOLL	OWING BOA	RD ACTION

P300 (M347) Rev 3/15/01

REQUEST FOR PROJECT POSITIONS

Эе	Ppartment Date <u>9/8/2015</u> No
۱.	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)
1.	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:
S .	Briefly explain the consequences of not filling the project position(s) in terms of: a. potential future costs b. legal 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.
3.	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
).	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