POSITION ADJUSTMENT REQUEST

NO. <u>22056</u> DATE <u>3/20/2017</u>

Department <u>County Library</u> Action Requested: Cancel one Permanent-intermitent L Experience Level positon Nos. 11412 & 11415, Add three Classification Questionnaire attached: Yes □ No ☑ / Total One-Time Costs (non-salary) associated with requ Estimated total cost adjustment (salary / benefits / one ti Total annual cost <u>\$6,819.00</u> Total this FY <u>\$1,705.00</u> SOURCE OF FUNDING TO OFFSET ADJUSTMENT L	e Permanent-intermittent Propose Cost is within Departmen est: <u>\$0.00</u> me): Net County Cost N.C.C. this FY	rg No. <u>3732</u> Agency 4, and two Permanen Library Assistant-Jou d Effective Date: <u>4/1</u> nt's budget: Yes ⊠	t-intermittent Clerk- urney Level positions.
Department must initiate necessary adjustment and submit to Use additional sheet for further explanations or comments.		Melinda S. (for) Depart	Cervantes
REVIEWED BY CAO AND RELEASED TO HUMAN RE		. , .	
	BR for		4/7/2017
	Deputy County Ac	Iministrator	Date
HUMAN RESOURCES DEPARTMENT RECOMMENDA Cancel one vacant permanent-intermittent Librarian (3A) \$5,616); cancel two vacant permanent-intermittent Clerk and grade 3RH-0750 (\$2,905-\$3,605); and add three pe (represented) positions at salary plan and grade QXX-10 Amend Resolution 71/17 establishing positions and resolutions allocating classe	WA) (represented) at sala -Experienced Level (JWX rmanent-intermittent Libra 030 (\$3,232-\$4,127) in the	ry plan and grade Q) B) (represented) and ary Assistant-Journey b Library depart.	11415, at salary plan
Effective: Day following Board Action.	Eldreai Ell		5/15/2017
(2 uto)	(for) Director of Hu		Date
COUNTY ADMINISTRATOR RECOMMENDATION: Approve Recommendation of Director of Human Res Disapprove Recommendation of Director of Human Other:	sources	DATE <u>5/30/2017</u> /s/ Julie DiMaggio Enea (for) County Administrator	
BOARD OF SUPERVISORS ACTION: Adjustment is APPROVED DISAPPROVED	Dav		e Board of Supervisors Administrator
DATE	BY		
APPROVAL OF THIS ADJUSTMENT CONSTITU	JTES A PERSONNEL / S/	ALARY RESOLUTIO	N AMENDMENT
POSITION ADJUSTMENT ACTION TO BE COMPLETED BY Adjust class(es) / position(s) as follows:	HUMAN RESOURCES DEP	ARTMENT FOLLOWIN	NG BOARD ACTION

P300 (M347) Rev 3/15/01

REQUEST FOR PROJECT POSITIONS

De	partment	Date <u>5/30/2017</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 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, equ	uipment, etc.)		
	c. Less revenue or expenditure:	d. Net cost to Genera	al or other fund:		
6.	Briefly explain the consequences of not fillin 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.
- 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