POSITION ADJUSTMENT REQUEST

NO. <u>22145</u>

		DAT	E <u>8/4/17</u>	
	partment No./			
Action Requested: ADOPT Position Adjustment Resolution N				
Medicine-Exempt (BKD1) (unrepresented) at salary plan and Medicine-Exempt (BKD1) (unrepresented) position, and canc Animal Services Department.				
	Proposed	Effective Date: 9/	1/2017	
Classification Questionnaire attached: Yes D No X / Cos	•			
Total One-Time Costs (non-salary) associated with request:	•	Ū		
Estimated total cost adjustment (salary / benefits / one time):				
Total annual cost <u>\$0.00</u>	Net County Cost	\$0.00		
Total this FY <u>\$0.00</u>	N.C.C. this FY	\$0.00		
SOURCE OF FUNDING TO OFFSET ADJUSTMENT Cost n		<u>+0.00</u>		
Department must initiate necessary adjustment and submit to CAO.				
Use additional sheet for further explanations or comments.		Arturo (Castillo	
	-	(for) Depart	ment Head	
REVIEWED BY CAO AND RELEASED TO HUMAN RESOU	RCES DEPARTMENT			
			1/07/10	
	Susan Sr	nith	4/27/18	
	Deputy County Ad	ministrator	Date	
HUMAN RESOURCES DEPARTMENT RECOMMENDATION ADOPT Position Adjustment Resolution No. 22145 to establis (unrepresented) at salary plan and grade B85-1957 (\$8,531 - position no. 16728 and incumbent to the Chief of Shelter Med Animal Services Department.	h the classification of \$10,370) and reclass	Chief of Shelter Me	eterinarian-Exempt	
Amend Resolution 71/17 establishing positions and resolutions allocating classes to the	Basic / Exempt salary schedu	le.		
Effective: Day following Board Action.	Lauren Ludv	<i>v</i> ig	7/3/2018	
	(for) Director of Hun	nan Resources	Date	
COUNTY ADMINISTRATOR RECOMMENDATION: Approve Recommendation of Director of Human Resource Disapprove Recommendation of Director of Human Resource Other:		DATE		
		(for) County Administrator		
BOARD OF SUPERVISORS ACTION: Adjustment is APPROVED DISAPPROVED	David	David J. Twa, Clerk of the Board of Supervisors and County Administrator		
DATE	BY _			
APPROVAL OF THIS ADJUSTMENT CONSTITUTES	A PERSONNEL / SA	ALARY RESOLUTIO	N AMENDMENT	
POSITION ADJUSTMENT ACTION TO BE COMPLETED BY HUM	N RESOURCES DEP	ARTMENT FOLLOWIN	IG BOARD ACTION	

POS U 200 (C S зO Adjust class(es) / position(s) as follows:

P300 (M347) Rev 3/15/01

REQUEST FOR PROJECT POSITIONS

De	partment	Date <u>7/3/2018</u>	No. <u>xxxxxx</u>		
1.	Project Positions Requested:				
2.	Explain Specific Duties of Position(s)				
3.	Name / Purpose of Project and Funding Source	ce (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, eq	uipment, etc.)		
	c. Less revenue or expenditure:	d. Net cost to Genera	l or other fund:		
6.	•	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