

**POSITION ADJUSTMENT REQUEST**

NO. 22412  
DATE 1/2/2019

Department County Library Department No./  
Budget Unit No. 0621 Org No. 3798 Agency No. 85

Action Requested: Reclassify one (1) full time 40/40 Community Library Manager (3AGG) position no. 12341 and its incumbent to one (1) full-time Senior Community Library Manager (3AGH) position.

Proposed Effective Date: 3/1/2019

Classification Questionnaire attached: Yes  No  / Cost is within Department's budget: Yes  No

Total One-Time Costs (non-salary) associated with request: \$0.00

Estimated total cost adjustment (salary / benefits / one time):

Total annual cost \$8,301.00 Net County Cost \$0.00  
Total this FY \$2,767.00 N.C.C. this FY \$0.00

SOURCE OF FUNDING TO OFFSET ADJUSTMENT Library Fund

Department must initiate necessary adjustment and submit to CAO.  
Use additional sheet for further explanations or comments.

Melinda S. Cervantes

\_\_\_\_\_  
(for) Department Head

REVIEWED BY CAO AND RELEASED TO HUMAN RESOURCES DEPARTMENT

BR for JE

1/14/2019

\_\_\_\_\_  
Deputy County Administrator

\_\_\_\_\_  
Date

**HUMAN RESOURCES DEPARTMENT RECOMMENDATIONS**

DATE 8/26/2019

Reclassify one (1) full-time Community Library Manager (3AGG) (represented) position #12341 at salary plan and grade ZAX 1624 (\$6,360.28 - \$8,122.34) and its incumbent to Senior Community Library Manager (3AGH) (represented) at salary plan and grade ZAX 1662 (\$6,604.15 - \$8,433.77) and place its incumbent at Step 7 of the salary range of the new classification in the Library Department effective 9/1/19

Amend Resolution 71/17 establishing positions and resolutions allocating classes to the Basic / Exempt salary schedule.

Effective:  Day following Board Action.

9/1/2019(Date)

Mary Jane De Jesus-Saepharn

8/26/2019

\_\_\_\_\_  
(for) Director of Human Resources

\_\_\_\_\_  
Date

**COUNTY ADMINISTRATOR RECOMMENDATION:**

DATE

9/5/2019

Approve Recommendation of Director of Human Resources

Disapprove Recommendation of Director of Human Resources

Other: \_\_\_\_\_

/s/ Julie DiMaggio Enea

\_\_\_\_\_  
(for) County Administrator

**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 CONSTITUTES A PERSONNEL / SALARY RESOLUTION AMENDMENT**

POSITION ADJUSTMENT ACTION TO BE COMPLETED BY HUMAN RESOURCES DEPARTMENT FOLLOWING BOARD ACTION

Adjust class(es) / position(s) as follows:

## REQUEST FOR PROJECT POSITIONS

Department \_\_\_\_\_

Date 1/2/19

No. xxxxxx

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
  
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