## **POSITION ADJUSTMENT REQUEST**

NO. <u>45152</u> DATE <u>4/2/2021</u>

	oartment No./ dget Unit No. <u>0035</u> Org No	Agency No. 05		
Action Requested: Reallocate the salary for the classification of Departmental Human Resources Supervisor (unrepresente rom plan/grade B85/1012 to salary plan/grade B85/1876, which will result in a 9% increase.				
	Proposed Effective	Date:		
Classification Questionnaire attached: Yes ☐ No ☒ / Cos	•			
Total One-Time Costs (non-salary) associated with request:				
Estimated total cost adjustment (salary / benefits / one time):				
Total annual cost	Net County Cost			
Total this FY	N.C.C. this FY			
SOURCE OF FUNDING TO OFFSET ADJUSTMENT				
Department must initiate necessary adjustment and submit to CAO.				
Use additional sheet for further explanations or comments.		Elizabeth Loud		
	(f	or) Department Head		
	Deputy County Administrator	Date		
LUMANI DESCUIDOSO DEDADTASAIS DESCUINISMIDATIONIS		DATE		
HUMAN RESOURCES DEPARTMENT RECOMMENDATION	IONS DATE			
Amend Resolution 71/17 establishing positions and resolutions allocating classes to the Basic / Exempt salary schedule.  Effective: Day following Board Action.				
Day following Board Action:	Tina Pruett	4/13/2021		
	(for) Director of Human Resou	irces Date		
COUNTY ADMINISTRATOR RECOMMENDATION:  Approve Recommendation of Director of Human Resource Disapprove Recommendation of Director of Human Resource Other:		E		
		(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 RE	SOLUTION AMENDMENT		

P300 (M347) Rev 3/15/01

## **REQUEST FOR PROJECT POSITIONS**

De	Department Date <u>4/13/2021</u> No			
1.	Project Positions Requested:			
2.	Explain Specific Duties of Position(s)			
3.	3. Name / Purpose of Project and Funding Source (do not use acronyms i.e. SB40 Project or SDSS F	Project and Funding Source (do not use acronyms i.e. SB40 Project or SDSS Funds)		
4.	<ol> <li>Duration of the Project: Start Date End Date</li> <li>Is funding for a specified period of time (i.e. 2 years) or on a year-to-year basis? Please explain.</li> </ol>			
5.	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.	<ul> <li>Briefly explain the consequences of not filling the project position(s) in terms of:         <ul> <li>a. potential future costs</li> <li>b. legal implications</li> <li>c. financial implications</li> </ul> </li> </ul>	d. political 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.	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