POSITION ADJUSTMENT REQUEST

NO. <u>25876</u> DATE <u>12/22/2021</u>

	ment No./	nov No. 10		
Action Requested: Add one (1) Social Services Program Assistant (X0SA) (represented) full time position at Salary Plan and Grade 255 1384 (\$5,333.26 - \$6482.61) and cancel (1) Social Services Employment Placement Counselor (X7WB) (represented) full time position at Salary Plan and Grade 255 1434 (\$5,592.85 - \$6798.14) position #15839				
	Proposed Effective Date:	·		
Classification Questionnaire attached: Yes \(\subseteq \) No \(\subseteq \) / Cost i		⊠ No ∐		
Total One-Time Costs (non-salary) associated with request: \$0	<u>.00</u>			
Estimated total cost adjustment (salary / benefits / one time):				
Total annual cost <u>\$56,472.00</u>	Net County Cost \$0.00			
Total this FY <u>\$56,472.00</u>	N.C.C. this FY <u>0.00</u>			
SOURCE OF FUNDING TO OFFSET ADJUSTMENT 100% F6	ederal/State single allocation			
Department must initiate necessary adjustment and submit to CAO. Use additional sheet for further explanations or comments.				
ose additional sheet of iditiner explanations of comments.	Mai	rcie Clark		
	(for) Dep	partment Head		
REVIEWED BY CAO AND RELEASED TO HUMAN RESOURCE	ES DEPARTMENT			
	Lara DeLaney	1/7/2022		
	Deputy County Administrator	Date		
HUMAN RESOURCES DEPARTMENT RECOMMENDATIONS Add one (1) Social Services Program Assistant (XOSA) (represe - \$6,482.61) and cancel (1) Social Services Employment Placer and Grade 255 1434 (\$5,592.85 - \$6,798.14) position #15839	nted) position at Salary Plan and G nent Counselor (X7WB) (represented			
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P300 (M347) Rev 3/15/01

REQUEST FOR PROJECT POSITIONS

De	epartment Date <u>1/19/2022</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.	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	
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 a 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	it th
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