POSITION ADJUSTMENT REQUEST

NO. <u>26341</u> DATE <u>10/11/2024</u>

Department No./
Budget Unit No. 0501 Org No. 5101 Agency No. 19

Department Employment and Human Services Budget	Unit No. <u>0501</u> Org No. <u>5101</u> Agency N	No. <u>19</u>
Action Requested: APPROVE Resolution No. 26341 for additional	al vacation accruals for the Employmer	nt & Human Services
Chief Deputy Director - Exempt (XAB1) at a rate equal to 199.92		
the Employment & Human Services Director.		
	Proposed Effective Date: 11/1	<u>/2024</u>
Classification Questionnaire attached: Yes No / Cost is	within Department's budget: Yes 🛚	No 🗌
Total One-Time Costs (non-salary) associated with request: \$0.0	<u>0</u>	
Estimated total cost adjustment (salary / benefits / one time):		
Total annual cost \$11,028.00	Net County Cost \$662.00	
Total this FY \$7,352.00	N.C.C. this FY \$441.00	
SOURCE OF FUNDING TO OFFSET ADJUSTMENT $\underline{59\%}$ Fede	ral, 35% State, and 6% County	
Department must initiate necessary adjustment and submit to CAO.		
Use additional sheet for further explanations or comments.		DUDAI
	Jose Merlos	, DHRA I
	(for) Departn	nent Head
REVIEWED BY CAO AND RELEASED TO HUMAN RESOURCE	S DEPARTMENT	
	Kaith in laffing for	40/45/2024
	Kaitlyn Jeffus for	10/15/2024
	Deputy County Administrator	Date
MAN RESOURCES DEPARTMENT RECOMMENDATIONS DATE		
Amend Resolution 71/17 establishing positions and resolutions allocating classes to the Basic	c / Exempt salary schedule.	
Effective: Day following Board Action.		
(Date)		
——————————————————————————————————————	r) Director of Human Resources	Date
COUNTY ADMINISTRATOR RECOMMENDATION:	DATE	
Approve Recommendation of Director of Human Resources	DATE	
Disapprove Recommendation of Director of Human Resource	es	
Other:		<u> </u>
	(for) County	/ Administrator
BOARD OF SUPERVISORS ACTION:	Monica Nino, Clerk of the	Board of Supervisors
Adjustment is APPROVED DISAPPROVED		Administrator
DATE	DV	
DATE	BY	
ADDDOVAL OF THE AD HIGTMENT CONSTITUTES AD		
APPROVAL OF THIS ADJUSTMENT CONSTITUTES A P	PERSONNEL / SALARY RESOLUTION	I AMENDMENT
POSITION ADJUSTMENT ACTION TO BE COMPLETED BY HUMAN R		

P300 (M347) Rev 3/15/01

REQUEST FOR PROJECT POSITIONS

De	partment No	
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 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