

POSITION MANAGEMENT REQUEST FORM

Business Unit Name: Public Health Services

Business Unit Number: 27500

SECTION I – TYPE OF REQUEST

Function	Check Applicable	Comments
Position Update	<input type="checkbox"/>	May require Commissioners Court approval
Position Reclassification	<input type="checkbox"/>	May require Commissioners Court approval
New Position Request	<input checked="" type="checkbox"/>	Requires Commissioners Court approval
Is computer usage < 25%?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Does not require annual Cybersecurity training if "Yes"

SECTION II – REASON FOR REQUEST

Request for eight new positions due to business needs.

SECTION III – PROPOSED EFFECTIVE DATE

Proposed Effective Date	<u>8/9/25</u>	Date must be the beginning of a pay period. For requests requiring Commissioners Court approval, the earliest effective date will be the first pay period after approval.
Grant Effective Date	From: _____ To: _____	

SECTION IV – POSITION DATA

Current Use "Pos_List_File" (PCN Download) to complete all fields		Proposed Complete all fields for a new position or change appropriate field(s) for existing position.	
		Number of Positions	<u>8</u>
Position Title		Position Title (30 Spaces Maximum)	<u>Spec., Crisis Intervention</u>
Job Code Number		Job Code Number	<u>000702</u>
Job Code Description		Job Code Description	<u>Specialist III</u>
Position Number		Position Number (HRRM Use Only)	
Company (CS, FC, HC, JV or PA)		Company (CS, FC, HC, JV or PA)	<u>HC</u>
Business Unit		Business Unit	<u>27500</u>
Home Department ID Number		Home Department ID Number	<u>27530310</u>
Location		Location	<u>883A000</u>
Full Time, Part Time or Temporary		Full Time, Part Time or Temporary	<u>Full Time</u>
Budgeted Hours		Budgeted Hours	<u>40</u>
Salary Range Maximum		Salary Range Maximum	<u>\$43.95</u>
FLSA Code		FLSA Code	<u>N</u>
Reports To Position Number		Reports To Position Number	<u>10027425</u>
Fund Code		Fund Code	<u>1000</u>
Funding Department ID Number		Funding Department ID Number	<u>27530310</u>
Account (Same for all Business Units)	<u>510010</u>	Account (Same for all Business Units)	<u>510010</u>
Business Unit PC (Projects or Grants only)		Business Unit PC (Projects or Grants only)	
Project/Grant (Projects or Grants only)		Project/Grant (Projects or Grants only)	
Activity ID (Projects or Grants only)		Activity ID (Projects or Grants only)	



Business Unit Approval (Business Unit Head or Designee)

7/22/25

Date

POSITION MANAGEMENT REQUEST FORM

Business Unit Name: Public Health Services

Business Unit Number: 27500

SECTION I – TYPE OF REQUEST

Function	Check Applicable	Comments
Position Update	<input type="checkbox"/>	May require Commissioners Court approval
Position Reclassification	<input type="checkbox"/>	May require Commissioners Court approval
New Position Request	<input checked="" type="checkbox"/>	Requires Commissioners Court approval
Is computer usage < 25%?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Does not require annual Cybersecurity training if "Yes"

SECTION II – REASON FOR REQUEST

Request for eight new positions due to business needs.

SECTION III – PROPOSED EFFECTIVE DATE

Proposed Effective Date	<u>8/9/25</u>	Date must be the beginning of a pay period. For requests requiring Commissioners Court approval, the earliest effective date will be the first pay period after approval.
Grant Effective Date	From: _____ To: _____	

SECTION IV – POSITION DATA

Current Use "Pos_List_File" (PCN Download) to complete all fields		Proposed Complete all fields for a new position or change appropriate field(s) for existing position.	
		Number of Positions	<u>8</u>
Position Title		Position Title (30 Spaces Maximum)	Technician, Emergency Medical
Job Code Number		Job Code Number	000369
Job Code Description		Job Code Description	Technician III
Position Number		Position Number (HRRM Use Only)	
Company (CS, FC, HC, JV or PA)		Company (CS, FC, HC, JV or PA)	HC
Business Unit		Business Unit	27500
Home Department ID Number		Home Department ID Number	27530310
Location		Location	883A000
Full Time, Part Time or Temporary		Full Time, Part Time or Temporary	Full Time
Budgeted Hours		Budgeted Hours	40
Salary Range Maximum		Salary Range Maximum	\$39.73
FLSA Code		FLSA Code	N
Reports To Position Number		Reports To Position Number	10027425
Fund Code		Fund Code	1000
Funding Department ID Number		Funding Department ID Number	27530310
Account (Same for all Business Units)	<u>510010</u>	Account (Same for all Business Units)	<u>510010</u>
Business Unit PC (Projects or Grants only)		Business Unit PC (Projects or Grants only)	
Project/Grant (Projects or Grants only)		Project/Grant (Projects or Grants only)	
Activity ID (Projects or Grants only)		Activity ID (Projects or Grants only)	


Business Unit Approval (Business Unit Head or Designee)

6/30/25

Date

POSITION MANAGEMENT REQUEST FORM

Business Unit Name: Public Health Services

Business Unit Number: 27500

SECTION I – TYPE OF REQUEST

Function	Check Applicable	Comments
Position Update	<input type="checkbox"/>	May require Commissioners Court approval
Position Reclassification	<input type="checkbox"/>	May require Commissioners Court approval
New Position Request	<input checked="" type="checkbox"/>	Requires Commissioners Court approval
Is computer usage < 25%?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Does not require annual Cybersecurity training if "Yes"

SECTION II – REASON FOR REQUEST

Request for two new positions due to business needs.

SECTION III – PROPOSED EFFECTIVE DATE

Proposed Effective Date	<u>8/9/25</u>	Date must be the beginning of a pay period. For requests requiring Commissioners Court approval, the earliest effective date will be the first pay period after approval.
Grant Effective Date	From: _____ To: _____	

SECTION IV – POSITION DATA

Current Use "Pos_List_File" (PCN Download) to complete all fields		Proposed Complete all fields for a new position or change appropriate field(s) for existing position.	
		Number of Positions	<u>2</u>
Position Title		Position Title (30 Spaces Maximum)	<u>Outr Wkr, Viol Interruption</u>
Job Code Number		Job Code Number	<u>000294</u>
Job Code Description		Job Code Description	<u>Outreach Worker II</u>
Position Number		Position Number (HRRM Use Only)	
Company (CS, FC, HC, JV or PA)		Company (CS, FC, HC, JV or PA)	<u>HC</u>
Business Unit		Business Unit	<u>27500</u>
Home Department ID Number		Home Department ID Number	<u>27530300</u>
Location		Location	<u>883A000</u>
Full Time, Part Time or Temporary		Full Time, Part Time or Temporary	<u>Full Time</u>
Budgeted Hours		Budgeted Hours	<u>40</u>
Salary Range Maximum		Salary Range Maximum	<u>\$31.11</u>
FLSA Code		FLSA Code	<u>N</u>
Reports To Position Number		Reports To Position Number	<u>10024033</u>
Fund Code		Fund Code	<u>1000</u>
Funding Department ID Number		Funding Department ID Number	<u>27530300</u>
Account (Same for all Business Units)	<u>510010</u>	Account (Same for all Business Units)	<u>510010</u>
Business Unit PC (Projects or Grants only)		Business Unit PC (Projects or Grants only)	
Project/Grant (Projects or Grants only)		Project/Grant (Projects or Grants only)	
Activity ID (Projects or Grants only)		Activity ID (Projects or Grants only)	



Business Unit Approval (Business Unit Head or Designee)

7/22/25

Date