



HUMAN RESOURCES DIVISION
NEW PERSONNEL REQUEST
FY 2021-2022

Requester's Name: _____ Date: _____

Division Name: _____ Section Name: _____

Mid-Year (funded by Division/Section/Program) Fiscal Year (funded through budget process)

Request Type

Complete the back side of this form and include details

Addition of Position: Also submit: 1) Current Org Chart 2) Proposed Org Chart
 New Position Existing Position Paid Intern

Position Title: _____
Number of Hours/Week: _____ Number of Positions: _____

Change in Hours Worked: List the employee(s) affected by the change in hours on the back, under "Proposal."

Position Title: _____
Current Hours/Week: _____ New Hours/Week: _____

Assignment or Additional Pay: Also submit: 1) Completed New Assignment Pay Request Form for new assignments
 New Assignment or Additional Pay Existing Assignment or Additional Pay

Assignment or Additional Pay Type: _____
Number of Assignments: _____

Technology Costs

Select any applicable technology needs for the additional position(s).

Desktop Computer E-mail Access Office Phone Printer Television
 Laptop Computer Network Access Cell Phone Scanner Other: _____

Division Approvals

All approvals must be completed before submitting to HR for review.

	RECOMMENDATION	SIGNATURE	DATE
Section Director:	<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved	_____	_____
Division Director:	<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved	_____	_____
Deputy City Manager:	<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved	_____	_____

Finance Approval
(Mid-Year Only)

Funding Information (if applicable): _____
Route to Budget Team: Yes No Budget Approval received on: _____
Finance Approval: Signature: _____ Date: _____

If additional documentation is needed, submit it as an attachment.

Organizational Need Assessment

What has changed operationally to necessitate the proposed change?

Proposal

Describe the conceptual plan including which positions will be impacted and what job duties need to be performed.

Be sure to address if this will create the need for other new position(s) in the future.

Which Council Priority does this request support and how will this request support that priority?



Human Resources Process/Notes

(Human Resources only, please leave this space blank.)
