

### **Chapter 3 Allocation of Positions**

- Section 1      A.      New Position Requests supported in whole or part by County tax levy:  
Requests for new positions or expanding part-time position which require County funds must be submitted on a “New/Expanded Position Request Form” by February 28<sup>th</sup>.

The Hiring Review Committee may approve any position creations or expansions after considering recommendations provided by the Employee Resources Department and the Executive Management Team. The Employee Resources Committee will review and establish all new classifications. The union representing the new classification will also review and approve the recommended salary rate.

If a new or expanded position is approved by the Hiring Review Committee and funded by the County Board, it will be effective January 1 of the following year unless otherwise indicated.

Fully grant funded positions will follow the same procedures outlined above. However, these requests can be made whenever grant funds are available. The grant funded position is effective upon Hiring Review Committee approval, Employee Resources Committee approval (if a new classification is being created), or when grant funds are available, whichever is later.

- Section 2      A.      Vacant Position Control: Positions which are vacant for a period of fifteen (15) months are deleted from the allocation list unless an extension is granted by the Hiring Review Committee. Extensions of up to twelve (12) months can be granted by the Hiring Review Committee in response to requests from department heads which involve special circumstances.

**NEW OR EXPANDED POSITION REQUEST**  
**(Revised 2/06)**

**I. GENERAL INFORMATION**

Department: \_\_\_\_\_ Date: \_\_\_\_\_

Position requested: \_\_\_\_\_ FT  PT   
(if unsure of classification, indicate "To be determined".) Number of positions: \_\_\_\_\_

Team Position Will Be Assigned To: \_\_\_\_\_  
(Indicate NA if not applicable)

Projected Start Date of Position: \_\_\_\_\_ Priority Number of This Position: \_\_\_\_\_  
If you are requesting more than one position, prioritize all your requests and indicate the priority number of position.

**II. FULL EXPLANATION OF NEED FOR POSITION**

- A. What is your department's mission statement and how does position support this mission and/or department strategic plan?
- B. Indicate reasons for asking for position including purpose of position, applicable workload data and trends, etc. **plus attach relevant supporting data.** If more than one position of the same classification is being requested, also justify the number requested.
- C. What benefit will the position provide to the County? How does the position improve/enhance customer service and/or address community needs?
- D. Indicate any alternatives to creating this position that were considered and why you still chose to request the position?
- E. What will be the effect if the proposed position is not created?
- F. What criteria will you use to monitor the effectiveness and performance of the position. (Increasing revenues, improved customer service, decreasing costs, enhancing services, etc?)

**III. SPECIFIC DUTIES OF NEW POSITION**

- A. List the specific duties position will perform plus the approximate percentage of time to be spent on each duty.
- B. Could another County department use the expertise of this position? OR could you use the expertise of another department to meet your needs? Why or why not?
- C. If the work is currently being done by the County, how is it being accomplished (contract basis, temporary help, current employee, etc.)? Why is this arrangement no longer acceptable?

**IV. POSITION COSTS AND FUNDING SOURCES**

A. What is the anticipated total cost of this position? (Include salary; benefits; office space, remodeling, furniture, and equipment; travel; and other applicable costs.)

B. Explain specifically how position will be funded.

Amount of County tax levy: \_\_\_\_\_ % of total costs: \_\_\_\_\_

Amount of any outside funding: \_\_\_\_\_ % of total costs: \_\_\_\_\_

Source of outside funding: \_\_\_\_\_

Length of outside funding: \_\_\_\_\_

Likelihood of funding renewal: \_\_\_\_\_

Would this outside funding be used to offset the levy if not used for this position? \_\_\_\_\_

C. Will the proposed position allow your department to increase revenues or decrease expenditures beyond the cost of the position? If yes, how?

D. Does the proposed position provide preventive services that will lead to cost avoidance or more extensive services in the future? Or Can the proposed position be justified as an investment with future benefits to the County greater than the cost of the position? If yes, how?

E. Can the position costs be offset by eliminating or reducing a lower priority function? If yes, explain.

\_\_\_\_\_  
**Signature of Supervisor/Manager Completing Request**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Department Head's Signature**

\_\_\_\_\_  
**Date**

Submit this report to the Library Director by **February 28<sup>th</sup>**.