

New Employee And Position Change

ORDER NO.: _____

DATE: _____

HONORABLE COMMISSIONERS COURT, DALLAS COUNTY, TEXAS

I have, from employment application and/or performance reports in the files of my office and such other additional inquiries as I deem necessary, determined that the following applicants and/or employees are qualified to perform the functions of the respective positions described and approved in the annual budget for these positions, and that the salaries and/or allowances are within the annual rate set forth therein. I recommend and request the Court to direct payment of the requested amount of salary and/or allowance, effect on the date shown, to the incumbent or new employee listed below from the appropriation for the position shown, in accordance with the provisions of LGC 113.064, 115.021, and Commissioners Court Order 73-2021 (Dallas County Affirmative Action Plan) upon presentation of certified salary authorization to the County Auditor, in order to carry out the functions of this office as required by law.

Name: _____ Employee No.: _____

APPROVED BUDGET POSITION

CURRENT
Dept. No.: _____ Eff. Date: _____
Job Title: _____
Job Code: _____
Position No.: _____ Grade: _____
Salary Mo. Ex\$: _____
Hourly - Nex \$: _____
Misc. Salary \$: _____ Longevity: _____

PROPOSED
Dept. No.: _____ Eff. Date: _____
Job Title: _____
Job Code: _____
Position No.: _____ Grade: _____
Salary Mo. Ex\$: _____
Hourly - Nex \$: _____
Misc. Salary \$: _____ Longevity: _____

Check Appropriate Item In Each Category:

Status New hire Pt-time Regular Temp Re-hire
Action Promotion Demotion Step Inc
 FMLA LOA Military Transfer
 W/O PAY PAID Other

Street: _____
City: _____ Zip: _____
Phone: _____ Sex: M F
DOB: _____
SS#: _____

Race: White Black Hispanic
 American Indian Asian Other

Marital Status: S M D

I hereby certify that the above requested action is in accordance with the nondiscriminatory practices of equal employment opportunity regardless of race, creed, religion, color, national origin, sex, age or handicaps as set forth in the Dallas County Affirmative Action Plan and Dallas County's Personnel Policies and Procedures.

Date Department Phone No. Signature of Official

The above request is in accordance with Dallas County's Affirmative Action Plan and Personnel Policies and Procedures.

This office has reviewed the foregoing request in accordance with LGC 113.064 and recommends approval.

Date Signature of Director of Human Resources Date Signature of County Auditor

STATE OF TEXAS, COUNTY OF DALLAS DATE: _____

Be it recommended at a regular meeting of the Commissioners Court, Dallas County, Texas held on the _____ day of _____, 20 _____ came to be considered the matter of directing payment of salaries to new employees and/or increases in salaries and/or allowances of incumbent employees from appropriations made for the cited numbered positions in the approved budget;

WHEREAS, it is now, and after due consideration of the foregoing matter, the opinion of the Court that the request made meets requirements of applicable laws;

IT IS, THEREFORE, ORDERED, ADJUDGED and DECREED by the Court that the request made of this Court to direct payment to the employees named here in before be and is hereby approved for the requested salary from the effective date as stated.

Commissioner, Precinct No. 1 County Judge Commissioner, Precinct No. 2

Commissioner, Precinct No. 3 Commissioner, Precinct No. 4