## Livingston County, Michigan Position Request/Change Form **CONTACT INFORMATION** Requester: David Feldpausch Title of Requester: Director Date Requested: November 28, 2022 Dept. Phone Number/Extension: 7865 **POSITION INFORMATION** Position Title: Paramedic x 4 Supervisor: Amy Chapman No V 1. Is the purpose of this request to fill a position as a result of a vacancy? If so, name of person last holding this position: 2. Is the purpose of this request to reclassify a current position? No V 3. Is the purpose of this request to change the scheduled hours of an existing position? Yes From: To: If so, name of current incumbent: 4. Is the purpose of this request to transfer a current position? Proposed Department:\_\_ If so, Current Department: Position Type: Regular Term/Grant Temp. Unpaid Position Status: Full Time (30+) Part-Time (21-29) Part-Time (20 or Less) Number of hours per week: Justification of request / change of position (REQUIRED): Resolution approving additional 4 FTEs. Resolution # **FUNDING INFORMATION** (20.70/hr) Base Annual Salary: 76,530 x 4 This position is funded in whole or in part by a grant: Yes \_\_\_\_\_ No \_\_\_\_\_ % Funded: Allocation (Required): Current: Org. $\frac{21065100}{\%}$ % $\frac{100}{\%}$ Proposed (If changing): Org. Special Revenue Fund Position will be funded by: General Fund **Enterprise Fund** Internal Service Fund **REQUIRED APPROVALS** 11/28/2022 Supervisor (if applicable) Department Head Date HR OFFICE ONLY Job Class: 6007 6006 / Job Title: Paramedic Grade/Step: Date: 11/29/2022 FTE: 1.0 Employee Group: EMS HR Reviewed: **BUDGET OFFICE ONLY** 21065100 Position Control # Org. No X Object Code: 704000 X 706000 Funds Available: Yes Comments: Requires BOC approval. Requires budget amendment in 2023. 11/29/22 Budget Reviewed: Date:

Board Authorized on Date:

Resolution #: