

**Personnel Form**

**All new positions need to be listed. ALSO ANY POSITION CHANGES NEED TO BE LISTED HERE.**

New Position: Y/N	Effective Date:	Position Title:	Grade:	Salary:	Fringe:	% Funded by Grant:	# of Months Funded:	IF MOVING POSITIONS, MUST FILL OUT FOLLOWING COLUMNS:	Position Title <i><b>Moving From</b></i> :	Grade:	Position Number	EE#	Position Title <i><b>Moving To</b></i> :	Grade:	Position Number	EE#
N	10/1/2025	Program Coordinator		81,439.00	34,692.00	100%	12									
N	10/1/2025	Case Manager		72,168.00	33,010.00	100%	12									
N	10/1/2025	Counselor		120,689.00	41,812.00	100%	12									
<b>Salary and Fringe Benefits Totals:</b>				274,296.00	109,514.00											
Fringe Benefits: Itemize with rates in the space below:																
Total Number of FTE's:				Fringe Benefits Rate:												