



# CITY OF HOUSTON



Houston Public Works  
Position Approval Form

NAME:		UMD:
CLASSIFICATION:		JOB CODE:
COST CENTER:	PCN:	FUND:

<input type="checkbox"/> NEW HIRE	CURRENT BI-WEEKLY PAY:
	PROPOSED BI-WEEKLY PAY:
	VARIANCE:
<input type="checkbox"/> PROMOTION	

## PERSONNEL REVIEW:

<input type="checkbox"/> REPLACEMENT AS BUDGETED	<input type="checkbox"/> NEW POSITION (BUDGETED)
<input type="checkbox"/> UPGRADE WITH GHRS-1	<input type="checkbox"/> DOWNGRADE WITH GHRS-1

## BUDGET REVIEW:

FY				
BUDGETTED BI-WEEKLY	CURRENT BI-WEEKLY	PROPOSED BI-WEEKLY	PENDING ACTIONS	VARIANCE

## COMMENTS:

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ASSISTANT DIRECTOR FINANCE	ASSISTANT DIRECTOR PERSONNEL

APPROVED: <input type="checkbox"/> Yes <input type="checkbox"/> No
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DEPUTY DIRECTOR