

Banner ID # @	Last Name Goins, Natasha	First	Middle Initial	Telephone
Address		City		State Zip

Part I: Check all that apply

Classification: <input type="radio"/> Administrative/Professional Staff <input checked="" type="radio"/> Faculty <input type="radio"/> Support Staff <input type="radio"/> Temporary <input checked="" type="radio"/> Regular	<input type="checkbox"/> New Employee <input type="checkbox"/> Extension <input checked="" type="checkbox"/> Salary Adjustment <input type="checkbox"/> Separation (date: _____)	<input checked="" type="checkbox"/> Other (explain) Completion of Doctor of Nursing Practice Degree
<input checked="" type="radio"/> Full-Time <input type="radio"/> Part-Time		

Part II: Assignment/Accounting Number of months/weeks below notes how the position is funded; it does not guarantee employment status for a person. All Administrative/Professional and Faculty (Contract) and Support Staff (Non-Contract) employees are employed according to WCJC Policies and Procedures. Support Staff employees are at-will employees.

CURRENT Division/Unit: Allied Health	Job Vacancy No.: (if applicable) n/a
Job Title/Position: Instructor of Associate Degree Nursing	Specialized Area: Associate Degree Nursing
Budgeted Position? <input checked="" type="radio"/> Yes <input type="radio"/> No	Funded in which FY? FY23
Budget Number: 1610-14181-6091-102	Position No. (NBAPOSN): ADN009
Compensation: \$ 66,050	<input checked="" type="radio"/> Annual <input type="radio"/> Hourly <input type="radio"/> Other (explain)
Sched FAC Grade 3 Step 36	Hourly Rate: (Part-time only) \$ n/a per hr x n/a hrs/wk x n/a wks = \$ n/a per year
Start Date: 08/20/12	End Date: n/a
	<input type="radio"/> At-will-employee <input checked="" type="radio"/> Per contract
If temporary, anticipated termination date: n/a	
Position is funded for the following number of months/weeks: <input checked="" type="radio"/> 9 months <input type="radio"/> 10 1/2 months <input type="radio"/> 12 months <input type="radio"/> Other (specify)	

PROPOSED Division/Unit: Allied Health	Job Vacancy No.: (if applicable) n/a
Job Title/Position: Instructor of Associate Degree Nursing	Specialized Area: Associate Degree Nursing
Budgeted Position? <input checked="" type="radio"/> Yes <input type="radio"/> No	Name of Replaced Employee: n/a
Budget Number: 1610-14181-6091-102	Position No. (NBAPOSN): ADN009
Compensation: \$ 70,550	<input checked="" type="radio"/> Annual <input type="radio"/> Hourly <input type="radio"/> Other (explain)
Sched FAC Grade 7 Step 36	Hourly Rate: (Part-time only) \$ n/a per hr x n/a hrs/wk x n/a wks = \$ n/a per year
Start Date: 08/22/22	End Date:
	<input type="radio"/> At-will-employee <input checked="" type="radio"/> Per contract
If temporary, anticipated termination date: n/a	
Position is funded for the following number of months/weeks: <input checked="" type="radio"/> 9 months <input type="radio"/> 10 1/2 months <input type="radio"/> 12 months <input type="radio"/> Other (specify)	

Explanation of Action:

Part III: Position/Budget Authorization

Recommended by Supervisor/Department Head Sandra Davis Digitally signed by Sandra Davis Date: 2022.09.20 15:27:45 -05'00'	Date	Approved by Dean Donald S Smith Digitally signed by Donald S Smith Date: 2022.09.22 09:42:26 -05'00'	Date
Approved by Division Chair Carol Derkowski Digitally signed by Carol Derkowski Date: 2022.09.22 09:32:22 -05'00'	Date	Approved by Vice President <i>[Signature]</i> 9-26-22	Date
Approved by Cabinet Level Supervisor	Date	Reviewed by Human Resources <i>[Signature]</i> 9/29/22	Date
Budget Approval <i>[Signature]</i>	Date 09/28/2022	Approved by President <i>[Signature]</i> 9/29/22	Date