



Banner ID # _____		Last Name _____		First _____	Middle Initial _____	Telephone _____
Address _____		City _____		State _____	Zip _____	
<b>Part I: Check all that apply</b>						
Classification: <input type="radio"/> Administrative/Professional Staff <input type="radio"/> Faculty <input type="radio"/> Support Staff <input type="radio"/> Temporary <input checked="" type="radio"/> Regular		<input checked="" type="checkbox"/> New Employee <input type="checkbox"/> Extension <input type="checkbox"/> Salary Adjustment <input type="checkbox"/> Separation (date: _____)		<input type="checkbox"/> Other (explain) _____		
<input type="radio"/> Full-Time <input checked="" type="radio"/> Part-Time		<b>Part II: Assignment/Accounting</b> 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.				
<b>CURRENT</b> Division/Unit: _____				Job Vacancy No.: (if applicable) _____		
Job Title/Position: _____				Specialized Area: _____		
Budgeted Position? <input type="radio"/> Yes <input type="radio"/> No				Funded in which FY? _____		
Budget Number: _____				Position No. (NBAPOSN): _____		
Compensation: _____		<input type="radio"/> Annual <input type="radio"/> Hourly <input type="radio"/> Other (explain) _____		Sched _____		Hourly Rate: (Part-time only)
\$ _____				Grade _____		\$ _____ per hr x _____ hrs/wk x _____ wks =
				Step _____		\$ _____ per year
Start Date: _____		End Date: _____		<input type="radio"/> At-will-employee <input checked="" type="radio"/> Per contract		If temporary, anticipated termination date: _____
Position is funded for the following number of months/weeks: <input type="radio"/> 9 months <input type="radio"/> 10 ½ months <input checked="" type="radio"/> 12 months <input type="radio"/> Other (specify) _____						
<b>PROPOSED</b> Division/Unit: _____				Job Vacancy No.: (if applicable) _____		
Student Success				2206 A 028		
Job Title/Position: _____				Specialized Area: _____		
Director of Counseling and Disability Services				Counseling and Disability Services		
Budgeted Position? <input checked="" type="radio"/> Yes <input type="radio"/> No		Name of Replaced Employee: Susan Denman-Briones		Funded in which FY? FY22		
Budget Number: 1110-14101-6093-503				Position No. (NBAPOSN): DIR021		
Compensation: _____		<input checked="" type="radio"/> Annual <input type="radio"/> Hourly <input type="radio"/> Other (explain) _____		Sched CA _____		Hourly Rate: (Part-time only)
\$ 75,402				Grade 15 _____		\$ n/a per hr x n/a hrs/wk x n/a wks =
				Step 10 _____		\$ n/a per year
Start Date: 08/22/22				<input checked="" type="checkbox"/> At-will-employee <input checked="" type="checkbox"/> Per contract		If temporary, anticipated termination date: n/a
Position is funded for the following number of months/weeks: <input type="radio"/> 9 months <input type="radio"/> 10 ½ months <input checked="" type="radio"/> 12 months <input type="radio"/> Other (specify) _____						
Explanation of Action: _____						
<b>Part III: Position/Budget Authorization</b>						
Recommended by Supervisor/Department Head		Date		Approved by Dean		Date
Lindsey McPherson		Digitally signed by Lindsey McPherson DN: cn=Lindsey McPherson, o=WCJC, ou, email=lmcpherson@wcjc.edu, c=US Date: 2022.07.28 15:40:32 -0500				
Approved by Division Chair		Date		Approved by Vice President		Date
				Leigh Ann Collins		Digitally signed by Leigh Ann Collins Date: 2022.07.27 09:06:29 -0500
Approved by Cabinet Level Supervisor		Date		Reviewed by Human Resources		Date
				<i>(Signature)</i>		7/28/22
Budget Approval		Date		Approved by President		Date
<i>(Signature)</i>		07/28/2022		<i>(Signature)</i>		7-28-22