



**Wharton County  
Junior College**

**Personnel Action Form**  
Human Resources

Banner ID # @	Last Name Goswami, Mousumi	First Middle Initial	Telephone
Address		City	State Zip

**Part I: Check all that apply**

Classification: <input type="radio"/> Administrative/Professional Staff <input type="radio"/> Faculty <input type="radio"/> Support Staff <input type="radio"/> Temporary <input 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 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.

<b>CURRENT</b> Division/Unit:	Job Vacancy No.: (if applicable)
Job Title/Position:	Specialized Area:
Budgeted Position? <input checked="" type="radio"/> Yes <input type="radio"/> No	Funded in which FY? FY22
Budget Number:	Position No. (NBAPOSN):
Compensation: \$	<input checked="" type="radio"/> Annual <input type="radio"/> Hourly <input type="radio"/> Other (explain)
Sched _____ Grade _____ Step 9	Hourly Rate: (Part-time only) \$ _____ per hr x _____ hrs/wk x _____ wks = \$ _____ per year
Start Date:	End Date:
<input type="radio"/> At-will-employee <input type="radio"/> Per contract	
If temporary, anticipated termination date:	

Position is funded for the following number of months/weeks:  
☐ 9 months ☐ 10 ½ months ☐ 12 months ☐ Other (specify)

<b>PROPOSED</b> Division/Unit: Life Sciences	Job Vacancy No.: (if applicable) 2208 F 044
Job Title/Position: Temporary Instructor of Biology	Specialized Area: Biology
Budgeted Position? <input checked="" type="radio"/> Yes <input type="radio"/> No	Name of Replaced Employee: Perti Gadkari
Budget Number: <del>1610-14301-6102-100</del> 1610-14301-6091-100	Funded in which FY? FY22
Compensation: \$ 50,050	<input checked="" type="radio"/> Annual <input type="radio"/> Hourly <input type="radio"/> Other (explain)
Sched FAC Grade 1 Step 9	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	<input checked="" type="radio"/> At-will-employee <input type="radio"/> Per contract
If temporary, anticipated termination date: 05/31/23	

Position is funded for the following number of months/weeks:  
☒ 9 months ☐ 10 ½ months ☐ 12 months ☐ Other (specify)

Explanation of Action:

**Part III: Position/Budget Authorization**

Recommended by Supervisor/Department Head <i>King R...</i>	Date 8-11-22	Approved by Dean	Date
Approved by Division Chair <i>[Signature]</i>	Date 8/11/2022	Approved by Vice President <i>[Signature]</i>	Date 8-11-22
Approved by Cabinet Level Supervisor	Date	Reviewed by Human Resources <i>[Signature]</i>	Date 8/15/2022
Budget Approval <i>B. A. K...</i>	Date 08/15/2022	Approved by President <i>[Signature]</i>	Date 8-16-22

**RECEIVED**

Vice President of Instruction  
Date: 8/11/22 Initial: F