Wharton County Junior College

Personnel Action Form

Human Resources

Banner ID # / @	Last Name	First	Middle Initial	Telephone
	Thuesen, Magdaline			

Address _____ City _____ State _____ Zip _____

Part I: Check *all* that apply

Classification			
○ Administrative/Professional Staff ◉ Faculty ○ Support Staff		☑ New Employee ☐ Extension ☐ Salary Adjustment ☐ Separation (date:_____)	☑ Other (explain) changing from part time to full time faculty.
○ Temporary ◉ Regular	◉ Full-Time ○ 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:				Job Vacancy No.: (if applicable)
Job Title/Position:				Specialized Area:
Budgeted Position? ○ Yes ○ No				Funded in which FY?
Budget Number:				Position No. (NBAPOSN):
Compensation: $	○ Annual ○ Hourly ○ Other (explain)	Sched _____ Grade _____ Step _____		Hourly Rate: (Part-time only) $ _____ per hr x _____ hrs/wk x _____ wks = $ _____ per year
Start Date:	End Date:	○ At-will-employee ○ 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)

PROPOSED Division/Unit: Vocational Instruction				Job Vacancy No.: (if applicable) 2607 F 040
Job Title/Position: Instructor of Dental Hygiene				Specialized Area: Dental Hygiene
Budgeted Position? ◉ Yes ○ No	Name of Replaced Employee: Pamela Dobbs			Funded in which FY? FY27
Budget Number: 1110-14182-6091-102				Position No. (NBAPOSN): DEN005

Compensation:
$ 51,917
	◉ Annual
	○ Hourly
	○ Other (explain)
		Sched FAC
		Grade AAB
		Step n/a
				Hourly Rate: (Part-time only)
				$ n/a per hr x n/a hrs/wk x n/a wks =
				$ n/a per year

Start Date: ~~10/21/26~~ 01/06/27 KW		◉ At-will-employee ◉ Per contract		If temporary, anticipated termination date: n/a

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	Date	Approved by Dean	Date
Carol J. Derkowski, RDH, MAIE	Digitally signed by Carol J. Derkowski, RDH, MAIE Date: 2026.10.12 12:49:11 -05'00'	Kim Ashburn	Digitally signed by Kim Ashburn Date: 2026.10.12 12:51:29 -05'00'
Approved by Division Chair	Date	Approved by Vice President	Date
Carol J. Derkowski, RDH, MAIE	Digitally signed by Carol J. Derkowski, RDH, MAIE Date: 2026.10.12 12:49:23 -05'00'	Pam Millsap	Digitally signed by Pam Millsap Date: 2026.10.06 13:45:15 -05'00'
Approved by Cabinet Level Supervisor	Date	Reviewed by Human Resources	Date
		Pamela Palmer	10/12/26
Budget Approval	Date	Approved by President	Date
Justin Cy	10-12-26		10/13/26

Reg. 821 HR Requisition Number ⊢ 2610 0056

Revised May 29, 2014