

Personnel Action Form

	r						Hun	nan Resources
Banner ID#	Last Name Cruz, Cynthia		First		Middle It	iitial	Telenhone	
Address				ı	City	-	State	Zip
Part I: Check all that apply					•			
Classification:		☐ New En	nployee		✓ Other (explain)		
Administrative/Professional Staff								
Faculty Support Staff	Salary Adjustment Com			Comp	pletion of additional graduate hours			
OTemporary O Full-T		ration (date:)						
Regular Part-T	ime	оориги	ion (date					
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 e								
CURRENT Division/Unit:						Job Vacancy N	o.: (if applicable)	
Allied Health								
Job Title/Position:						Specialized Area:		
Instructor of Associate Degree Nursing						ADN		
Budgeted Position? • Yes No						Funded in which FY? FY17		
Budget Number:								
1110-14181-6091-102						Position No. (NBAPOSN): ADNO02		
Compensation: Sched FAC						Hourly Rate: (Part-time only)		
s 66,558	O Hourly Grade 1					\$ <u>N/A</u> per hr x hrs/wk x wks =		
Other (explain) Step 26						\$per year		
Start Date: 01/13/14	End Date:			At-will-em Per contract	At-will-employee If temporar N/A		, anticipated termination date:	
Position is funded for the following number of months/weeks:								
	ths 🚺 12 mor	_	Other (spe	cify)				
PROPOSED Division/Unit: Allied Health						Job Vacancy No	o.: (if applicable)	
Job Title/Position:						C-sololimed A-		
Instructor of Associate Degree Nursing						Specialized Area: ADN		
Budgeted Position? • Yes No Name of Replaced Employee: N/A						Funded in which FY? FY17		
Pudget Nymber								
Budget Number: 1110-14181-6091-102 Position No. (NBAPOSN): ADN002								
Compensation;	l -			ched FAC		Hourly Rate: (Part-time only)		
s 67,141	Mourly (Grade 1A			$\frac{\text{N/A} \text{per hr x} \text{hrs/wk x} \text{wks} = $		wks =
	Other (expla	in)	Step 2			\$ per y	ear	
				At-will-em		If temporary, anticipated termination date: N/A		ı date:
Position is funded for the following number of months/weeks:								
O 9 months O 10 1/2 months O 12 months O Other (specify)								
Explanation of Action: 10 5	CH fo	r ar	adu	ate lev	11			
Part III: Position/Budget Authorizat	Han		7,00	0,0,00	<u> </u>			
Recommended by Super visor/Departm			Ďati	e Approve	d by Dean			Dota
Recommended by Supervisor/Department Head Date Approved by Dean Date Approved by Dean Date Approved by Dean Date Date								
Approved by Division Chair Date Approved by Vice President								Date
Approved by Capinet Level Supervisor Date Reviewed Hunga Rejoids Date								
Approved by Capitles Devel Supervisor	ı		Dau	e Reviewe	Ke By	00	= 100 oale	Date 79 / 7
Budget Approval			Pate	e Ap rolle	d by Preside	The sec		Date
BAKacia			युन्।) 6	Deed.	Jam	leeke)	2-10-17
Reg. 821 HR Requisition N	Number F	1010	003 1	MCEIVE	0		Revised M	ay 29, 2014
			1.77 15	1.1		ara	EMED	V

Vice President of Instruction RECEIVED
Dean of Vocational Instruction
Date 431 Initials CF