

**Personnel Action Form** 

Human	Resources
riuman	<b>NCSOULCES</b>

Banner ID #	Last Name Knodel, Travis	First			Middl	e Initial	Telephone		
Address			City		City		State Zip		
Part I: Check all that apply									
Classification: Administrative/Professional Faculty Support Staff	Staff	<ul> <li>✓ New En</li> <li>☐ Extension</li> <li>☐ Salary A</li> </ul>	on .		Oth	er (explain)			
O Temporary O Regular O Part-T		Separat	ion (date:	)					
Part II: Assignment/Accounting N All Administrative/Professional and Support Staff employees are at-will e	Faculty (Contract) a								
CURRENT Division/Unit:						Job Vacancy	Job Vacancy No.: (if applicable)		
Job Title/Position:					Specialized	Specialized Area:			
Budgeted Position? <b>O</b> Yes <b>O</b> No					Funded in w	Funded in which FY?			
Budget Number:						Position No.	Position No. (NBAPOSN):		
Compensation:	Annual Hourly	Sched Grade					Hourly Rate: (Part-time only) \$per hr xhrs/wk xwks =		
\$	O Other (expl	ain)	Step			\$ pe	and the second se		
Start Date:	End Date:				At-will-employee Per contract	If temporary	, anticipated termination	on date:	
	number of months/withs <b>O</b> 12 mon		Other (spec	ify)			X (2 1 1)		
PROPOSED Division/Unit: Math and Physical Science						Job Vacancy No.: (if applicable) 1812 F 084			
Job Title/Position: Instructor of Math						Specialized . Math	Area:		
Budgeted Position? OYes ONo Name of Replaced Employee: Ariel Taylor						Funded in which FY? FY19			
Budget Number: 1610-1430	5-6091-10	C				Position No.	(NBAPOSN): MA	T014	
Compensation:	O Annual		Sched FA	AC			: (Part-time only)		
s 50,050	O Hourly O Other (expl	ain)	Grade <u>1</u> Step 10	)			r hr x hrs/wk ar year	x wks =	
Start Date: 08/19/19		5			At-will-employee Per contract	If temporary N/A	, anticipated termination	on date:	
Position is funded for the following r 9 months 0 10 ½ mon		-	Other (speci	ifv)					
Explanation of Action:	2								
Part III: Position/Budget Authoriz									
Recommended by Supervisor/Depart Yvonne Smith	ment Head Digitally signed by Yvonne DN: cn=Yvonne Smith, o=	Smith WCJC, ou=Math and Physic	Date	ejc.edu.	Approved by De	an		Date	
Approved by Division Chair	c=US Date: 2019.03.04 12:38:44		Date		Approved by Vie	ce President		Date	
Jennifer Mauch	Digitally signed by Jennifer DN: cn=Jennifer Mauch, o, c=US Date: 2019.03.05 11:37:13	Asuch		Zu .3-1		3-6-19			
Approved by Cabinet Level Supervis	Office 2019.03.05 11:37:13	ve sV	Date	e	Reviewed by Hu		see por	JUNE 19	
Budget Approval			3/8/19		App oved by Fre	sident (		Date	
Reg. 821 HR Requisition	Number <b>F</b> 19	03 00	10	L	2010	7 RECEI	VED Revised	May 29, 2014	
- 1					Vi Date:	ice President of 3 6 / Thit	f Instruction	Y	