

## **Personnel Action Form**

Human Resources

Banner ID #	Last Name Falcon		First Jessica	M R	iddle Initial	Talanhana	
Address	11 0.0011			City		State Zip	
Part I: Check all that apply							
Classification: Administrative/Professional Faculty Support Staff Temporary Regular Part-7	New Employee     Extension     Salary Adjustment     Separation (date:)			Other (explain)			
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: TRIO Student Support Services Grant						Job Vacancy No.: (if applicable) 1509 A 008	
Job Title/Position: TRIO Student Support Services Project Director						Specialized Area: TRIO Grant	
Budgeted Position? • Yes • No					Funded in wh	Funded in which FY? FY16	
Budget Number: 21170-6055-6185-400					Position No.	(NBAPOSN): GND06T	
Compensation: \$ 62,068	Annual Hourly Other (expl	ain)	Sched C Grade 4 Step 7		\$ N/A per		
Start Date: 09/01/15	End Date: N/A	Zaid Zaid.			yee If temporary, 08/31/16	anticipated termination date:	
Position is funded for the following number of months/weeks:							
9 months 10 10 1/2 months 12 months O Other (specify)							
PROPOSED Division/Unit: TRIO Student Support Services Grant						Job Vacancy No.: (if applicable) 1509 A 008	
Job Title/Position: TRIO Student Support Services Project Director					Specialized A		
Budgeted Position?  Yes No Name of Replaced Employee: N/A						nich FY? FY17	
Budget Number: 21171 -6055-6185-400					Position No.	(NBAPOSN): GND06T	
Compensation: 130 K s-62,068 L4,0L8	D Hourly	<u> </u>			\$ N/A per	(Part-time only) hr x N/A hrs/wk x N/A wks = r year	
Start Date: 9/01/16				At-will-emplo Per contract	yee If temporary, 08/31/17	anticipated termination date:	
Position is funded for the following number of months/weeks:  9 months  10 ½ months  Other (specify)							
Explanation of Action:							
Part III: Position/Budget Authorization							
Recommended by Supervisor/Department Head  Date  Approved by Dean  Date  Approved by Dean  Date							
Marybelle Perez  Digitally signed by Marybelle Perez Discontinuarbelle Perez Date: 2016.07.25 10:25:33 -0500'  Date  Approved by Division Chair  Date  Approved by Vice President  Date							
Approved by Cabinet Level Supervisor  Date Reviewed of Human Less recommendation of 126/16							
Budget Approval	- 27/20	9/	24/16	te Approvidit	oty a. Mcle	Date 4-26-16	

Reg. 821

HR Requisition Number

Revised May 29, 2014