

Personnel Action Form

Banner ID # 00134000	Last Name	First	Middle	Initial	Telenhone Telenhone
Address Taylor, Brice Wayne			City		State Zip
Part I: Check all that apply	ž.				
Administrative/Professional Staff Faculty Support Staff		Extension		Other (explain) hange in title/assignment	
Part II: Assignment/Accounting Nu All Administrative/Professional and F Support Staff employees are at-will er CURRENT Division/Unit:	amber of months/weeks below faculty (Contract) and Support	notes how the pos Staff (Non-Contra	ition is funded; it does	oloyed according to	o WCJC Policies and Procedures.
Instruction				Job Vacancy No.: (if applicable) 1002 A 001	
Job Title/Position: Coordinator of Dual Credit & University Articulation				Specialized Area: Instruction	
Budgeted Position? • Yes • No				Funded in which FY? FY17	
Budget Number: 1110-1408-6093-501				Position No. (NBAPOSN): CRD007	
Compensation: \$ 68,309	Annual Sched AA Hourly Grade 1 Other (explain) Step 36		_	Hourly Rate: \$ N/A per l	(Part-time only) hr x hrs/wk x wks = year
Start Date: 09/01/10	End Date: N/A	TO	At-will-employee Per contract	If temporary, anticipated termination date:	
Position is funded for the following nu 9 months 10 ½ month		Other (specify)		1.07.	
PROPOSED Division/Unit; Administration				Job Vacancy No.: (if applicable) 1704 A 006	
Job Title/Position: Assistant Director of Athletics				Specialized Area: Athletics	
Budgeted Position? Yes No Name of Replaced Employee: N/A				Funded in which FY? FY18	
Budget Number: 3914-351-6091-901				Position No. (NBAPOSN): ADRO05	
Compensation: \$ 68,309	Annual Hourly Other (explain)	Sched AA Grade 1 Step 36		Hourly Rate: (Part-time only) \$ N/A per hr x hrs/wk x wks = \$ per year	
Start Date:			At-will-employee Per contract	If temporary, anticipated termination date:	
Position is funded for the following num 9 months 10 ½ months	A .	Other (specify)	The state of the s		-
Explanation of Action:					7
Part III: Position/Budget Authorization Recommended by Supervisor/Department Head Date			Approved by Dean Date		
Approved by Division Chair Date Besty G. McCulb 4-18-17			Approved by Vice President Date		
Approved by Cabinet Level Supervisor Date Supervisor Date			Reviewed by Human Resources Date 14-25-17		
Bio Kocia	4-	/25/17	Approved by Preside	ent A. McC	Date 4-25-17
Reg. 821 HR Requisition N	umber A () ALL ()	1111			D / 134 00 0044

