

Banner ID #	Last Name Lindsey	First Shawna	Middle Initial	Telephone
Address		City		State Zip

Part I: Check all that apply

Classification: <input type="radio"/> Administrative/Professional Staff <input checked="" type="radio"/> Faculty <input type="radio"/> Support Staff <input type="radio"/> Temporary <input type="radio"/> Regular	<input type="checkbox"/> New Employee <input type="checkbox"/> Extension <input checked="" type="checkbox"/> Salary Adjustment <input type="checkbox"/> Separation (date: _____)	<input type="checkbox"/> Other (explain)
<input checked="" type="radio"/> Full-Time <input type="radio"/> 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: Allied Health/ Associate Degree Nursing	Job Vacancy No.: (if applicable) 1410 F 059
Job Title/Position: Instructor of Associate Degree Nursing	Specialized Area: Associate Degree Nursing
Budgeted Position? <input checked="" type="radio"/> Yes <input type="radio"/> No	Funded in which FY? FY16
Budget Number: 1110-14181-6091-102	Position No. (NBAPOSN): ADN007
Compensation: \$ 52,550	<input checked="" type="radio"/> Annual <input type="radio"/> Hourly <input type="radio"/> Other (explain)
Sched FAC Grade 1 Step 19	Hourly Rate: (Part-time only) \$ N/A per hr x _____ hrs/wk x _____ wks = \$ _____ per year
Start Date: 01/21/2015	End Date: NA
	<input type="radio"/> At-will-employee <input checked="" type="radio"/> Per contract
If temporary, anticipated termination date: N/A	
Position is funded for the following number of months/weeks: <input checked="" type="radio"/> 9 months <input type="radio"/> 10 ½ months <input type="radio"/> 12 months <input type="radio"/> Other (specify)	

PROPOSED Division/Unit: Allied Health / Associate Degree Nursing	Job Vacancy No.: (if applicable) 1410 F 059
Job Title/Position: Instructor of Associate Degree Nursing	Specialized Area: Associate Degree Nursing
Budgeted Position? <input checked="" type="radio"/> Yes <input type="radio"/> No	Name of Replaced Employee: N/A
Budget Number: 1110-14181-6091-102	Position No. (NBAPOSN): ADN007
Compensation: \$ 53,550	<input checked="" type="radio"/> Annual <input type="radio"/> Hourly <input type="radio"/> Other (explain)
Sched FAC Grade 2 Step 19	Hourly Rate: (Part-time only) \$ N/A per hr x _____ hrs/wk x _____ wks = \$ _____ per year
Start Date: 08/22/16	End Date:
	<input type="radio"/> At-will-employee <input checked="" type="radio"/> Per contract
If temporary, anticipated termination date: N/A	
Position is funded for the following number of months/weeks: <input checked="" type="radio"/> 9 months <input type="radio"/> 10 ½ months <input type="radio"/> 12 months <input type="radio"/> Other (specify)	

Explanation of Action:
has met criteria of post graduate hours for increase in pay (12 hours)

Part III: Position/Budget Authorization

Recommended by Supervisor/Department Head Deborah Yancey <small>Digitally signed by Deborah Yancey DN: cn=Deborah Yancey, o=WCJC, ou=ADN, email=deborah@wcjc.edu, c=US Date: 2016.03.29 09:40:05 -0500</small>	Date	Approved by Dean	Date
Approved by Division Chair Carol J. Derkowski <small>Digitally signed by Carol J. Derkowski Date: 2016.03.30 14:42:14 -05'00'</small>	Date	Approved by Vice President <i>[Signature]</i>	Date 4-4-16
Approved by Cabinet Level Supervisor	Date	Reviewed by Human Resources <i>[Signature]</i>	Date 04/06/16
Budget Approval <i>[Signature]</i>	Date 4/5/16	Approved by President <i>[Signature]</i>	Date 4-7-16