

Personnel Action Form Human Resources

Banner ID # .	Last Name	First	Middle I	nitial	Telenhone Telenhone	ces
Address	Johnson, Benjamin G.				State Zip	
			City			
Part I: Check all that apply Classification:		-				
Administrative/Professional Staff		✓ New Employee Other □ Extension		(explain)		
Faculty Support Staff		ary Adjustment				
Temporary O F	11 m	paration (date:	,			
Regular O F	Part-Time	Daration (date:	_			
Part II: Assignment/Account	ing Number of months/weeks be	low notes how the po	osition is funded; it does	not guarantee emp	loyment status for a person.	
	l and Faculty (Contract) and Supp	oort Staff (Non-Conti	ract) employees are emp	loyed according to	WCJC Policies and Procedures.	
Support Staff employees are at CURRENT Division/Un				Joh Wacaney N	Io : (if annlicable)	
CORRESTOR DIVISION ONE:				Job Vacancy No.: (if applicable)		
Job Title/Position:				Specialized Area:		
Budgeted Position? Yes No				Funded in which FY?		
Budget Number:				Position No. (NBAPOSN):		
Compensation:	(Annual	Sched		Hourly Rate (Part-time only)	
	Hourly	Grade			Hourly Rate: (Part-time only) \$ per hr x hrs/wk x wks =	
\$	Other (explain)	Step		\$ per		
Start Date:	End Date:		At-will-employee Per contract	If temporary, a	anticipated termination date:	
Position is funded for the follow	wing number of months/weeks:					
		Other (specify	r)			
PROPOSED Division/Unit: Instruction / Life Sciences				Job Vacancy No.: (if applicable) 2401 F 007		
Job Title/Position:			*	Specialized Ar		
nstructor of Biology				Biology		
Budgeted Position?				Funded in which FY? FY24		
Budget Number: 1610-1	4301-6091-100			Position No. (1	NBAPOSN): BIO015	
Compensation:	Annual	Sched FAC	_	Hourly Rate: (Part-time only)	
\$ 58,550	O Hourly	Grade 7	_	$\begin{array}{cccccccccccccccccccccccccccccccccccc$		
G	Other (explain)	Step 10	At-will-employee			
08/19/24			Per contract	n/a	anticipated termination date:	
Position is funded for the follo	wing number of months/weeks:					
② 9 months ② 10 ½		Other (specify)			
Explanation of Action:						
Part III: Position/Budget Au			,			
Recommended by Supervisor/I		Date ennifer Mahlmann	Approved by Dean		Dat	e
Jennifer Mahlm	Date: 2024.04.11 11					
				by Vice President Date		
Kevin Dees	Date: 2024.04.11 11:	33:16 -05'00'	Leigh Ann		Digitally signed by Leigh Ann Co Date: 2024.04.12 14:22:58,-05'0	
Approved by Cabinet Level Su	pervisor	Date	Reviewed by Hum	l Bu	husen 4/15/	-
Budget Approval)	1/5/2A34	Approved by Presi	dent y Mcli	Dat	te 2/
Reg. 821 HR Requi	sition Number 2404	0016	- Conte	y new	Pavisad May 20, 2014	JC /