

Personnel Action Form

Human Resources

Banner ID #				First Illy		Middle In	itial	Telenhone	
Address				City		State Zip			
Part I: Check all that apply									
Classification: Administrative/Professional Staff Faculty Support Staff			✓ New Employee✓ Extension✓ Salary Adjustment			Other (e	Other (explain)		
Temporary Full-Time Part-Time			Separation (date:)						
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:							Job Vacancy No.: (if applicable)		
Job Title/Position:							Specialized Area:		
Budgeted Position? O Yes O No							Funded in which FY?		
Budget Number:							Position No. (NBAPOSN):		
Compensation: Annual Hourly Other (cont.)			Sched Grade				Hourly Rate: (Part-time only) \$per hr xhrs/wk xwks =		
Start Date: End Date:						At-will-employee	\$ per year If temporary, anticipated termination date:		
Per contract							a composary, and orpated termination date.		
Position is funded for the following number of months/weeks: O 9 months 10 ½ months O 10 ½ months O Other (specify)									
PROPOSED Division/Unit: Student Success							Job Vacancy No.: (if applicable) 2012 A 020		
Job Title/Position: Title V Hispanic Serving Institutions Project Director							Specialized Area: Academic and Career Advising		
Budgeted Position? Yes No Name of Replaced Employee: n/a							Funded in which FY? FY21		
Budget Number: 21180.6071.6185.501 Position No. (NBAPOSN): GND07T									D07T
Compensation: Annual Hourly			Sched CA Grade 4			Hourly Rate: (Part-time only) \$ _n/a per hr x _n/a hrs/wk x _n/a wks =			
\$ 67,402	07,402 Other (expla		ain) Step 10				\$ n/a per year		
Start Date: 04/01/2			At-will-employee Per contract	If temporary, anticipated termination date: 08/31/2021		n date:			
Position is funded for the following number of months/weeks: O 9 months 10 ½ months O 12 months O Other (specify)									
Explanation of Action:									
Part III: Position/Budget Authorization									
Recommended by Supervisor/Department Head Date Approved by Dean Date Lindsey McPherson Digitally signed by Lindsey McPherson Date Digitally signed by Lindsey McPherson Digitally signed by Lindsey McPherson Date Digitally signed by Lindsey McPherson Digitally signed by Lindsey McPherson Digitally signed by Lindsey McPherson Date Digitally signed by Lindsey McPherson Digitally signe									
Approved by Division Chair Date Approved by Vice President Date Approved by Vice President 3-1-3(
Approved by Cabinet Level Supervisor Date Reviewed by Human Resources Date Date									
Budget Approval	in		3/8	3 Dat	te	Approved by Preside	n. Mol	ule -	Date 3-8-21
Reg. 821 HR Re	equisition N	Number A 21	02 002			-	TO HE TO HE I		May 29, 2014

Dean of Vocational Instruction
Date Octoor