



**Personnel Action Form**

Human Resources

Banner ID # @	Last Name Cabrales, Jerrick	First	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 checked="" type="radio"/> Temporary <input type="radio"/> Regular	<input checked="" type="radio"/> Full-Time <input type="radio"/> Part-Time	<input checked="" type="checkbox"/> New Employee <input type="checkbox"/> Extension <input type="checkbox"/> Salary Adjustment <input type="checkbox"/> Separation (date: _____)	<input type="checkbox"/> Other (explain)
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**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? <input type="radio"/> Yes <input type="radio"/> No	Funded in which FY?
Budget Number:	Position No. (NBAPOSN):
Compensation: \$	<input type="radio"/> Annual <input type="radio"/> Hourly <input type="radio"/> Other (explain)
Start Date:	End Date:
<input type="radio"/> At-will-employee <input type="radio"/> Per contract	
Position is funded for the following number of months/weeks: <input type="radio"/> 9 months <input type="radio"/> 10 ½ months <input type="radio"/> 12 months <input type="radio"/> Other (specify)	

PROPOSED Division/Unit: Administration/Athletics	Job Vacancy No.: (if applicable) 2308 F 038
Job Title/Position: Head Volleyball Coach/Instructor	Specialized Area: Volleyball
Budgeted Position? <input checked="" type="radio"/> Yes <input type="radio"/> No	Name of Replaced Employee: Brianna Janecka
Budget Number: 1110-14309-6091-100 70.9%, 3914-352-6091-901 29.1%	Funded in which FY? FY23
Compensation: \$ 59,556	<input checked="" type="radio"/> Annual <input type="radio"/> Hourly <input type="radio"/> Other (explain)
Start Date: 08/04/23	End Date:
<input checked="" type="radio"/> At-will-employee <input checked="" type="radio"/> Per contract	
Position is funded for the following number of months/weeks: <input type="radio"/> 9 months <input checked="" type="radio"/> 10 ½ months <input type="radio"/> 12 months <input type="radio"/> Other (specify)	

Explanation of Action:

<b>Part III: Position/Budget Authorization</b>			
Recommended by Supervisor/Department Head <i>Keith Case</i>	Date 8/3/23	Approved by Dean	Date
Approved by Division Chair	Date	Approved by Vice President	Date
Approved by Cabinet Level Supervisor	Date	Reviewed by Human Resources <i>Trish Johnson</i>	Date 8/4/23
Budget Approval <i>B. B. K...</i>	Date 08/03/2023	Approved by President <i>Barry E. ...</i>	Date 8-8-23