



Personnel Action Form

Human Resources

Banner ID # @	Last Name Shropshire, Andrea	First Andrea	Middle Initial	Telephone
Address		City	State	Zip

Part I: Check all that apply

Classification: <input checked="" type="radio"/> Administrative/Professional Staff <input checked="" type="radio"/> Faculty <input checked="" type="radio"/> Support Staff <input checked="" type="radio"/> Temporary <input checked="" type="radio"/> Regular	<input type="checkbox"/> New Employee <input type="checkbox"/> Extension <input checked="" type="checkbox"/> Salary Adjustment <input type="checkbox"/> Separation (date: _____)	<input checked="" type="checkbox"/> Other (explain) Salary adjustment per BOT approval 10/15/24.
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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: Vocational Instruction/Allied Health	Job Vacancy No.: (if applicable) N/A
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? 25
Budget Number: 1110-14180-6091-102	Position No. (NBAPOSN): ADN010
Compensation: \$ 85,221 <input checked="" type="radio"/> Annual <input type="radio"/> Hourly <input type="radio"/> Other (explain)	Hourly Rate: (Part-time only) \$ N/A per hr x N/A hrs/wk x N/A wks = \$ N/A per year
Sched FAC Grade 7 Step 36	
Start Date: 08/14/14	End Date: N/A
<input checked="" 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:
☐ 9 months ☒ 10 ½ months ☐ 12 months ☐ Other (specify)

PROPOSED Division/Unit: Vocational Instruction/Allied Health	Job Vacancy No.: (if applicable) N/A
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
Funded in which FY? 25	
Budget Number: 1110-14180-6091-102 1110-14181-6091-102	Position No. (NBAPOSN): ADN010
Compensation: \$ 91,054 <input checked="" type="radio"/> Annual <input type="radio"/> Hourly <input type="radio"/> Other (explain)	Hourly Rate: (Part-time only) \$ N/A per hr x N/A hrs/wk x N/A wks = \$ N/A per year
Sched FAC Grade 7 Step 46	
Start Date: 11/01/2024	End Date: N/A
<input checked="" 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:
☐ 9 months ☒ 10 ½ months ☐ 12 months ☐ Other (specify)

Explanation of Action:
Salary Increase

Part III: Position/Budget Authorization

Recommended by Supervisor/Department Head Sandra Davis Digitally signed by Sandra Davis Date: 2024.10.18 09:23:45 -05'00'	Date	Approved by Dean	Date
Approved by Division Chair Carol Derkowski Digitally signed by Carol Derkowski Date: 2024.10.18 10:44:44 -05'00'	Date	Approved by Vice President Leigh Ann Collins Digitally signed by Leigh Ann Collins Date: 2024.10.21 10:02:11 -05'00'	Date
Approved by Cabinet Level Supervisor	Date	Reviewed by Human Resources <i>Michael Dahmsen</i> 10-24-24	Date
Budget Approval <i>Betty A. McCracken</i>	Date	Approved by President <i>Betty McCracken</i> 10/23-24	Date