



Personnel Action Form

Human Resources

Banner ID #	First er			Middle Ini	tial Telephone	
Address	City		City	State Zip		
Part I: Check all that apply						
Classification: Administrative/Professional S Faculty Support Staff	Extension			Change	r (explain) ige in contract length from 10.5 to 12 i	
O Support Staff O Temporary O Full-T	mon			month	· ·	
Regular Part-T	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: Math & Physical Science					Job Vacancy No.: (if applicable) 1203 F 021	
Job Title/Position: Instructor of Math						Specialized Area: Math
Budgeted Position? • Yes • No					Funded in which FY? FY19	
Budget Number: 1110-14305-6091-100					Position No. (NBAPOSN): MATO10	
Compensation:	Annual Sched FAC					Hourly Rate: (Part-time only)
s 61,890	Control Cont			16	:	\$ N/A per hr x hrs/wk x wks = per year
Start Date: 01/12/15	End Date: N/A			O At-will-o		If temporary, anticipated termination date: N/A
Position is funded for the following number of months/weeks: 9 months 10 10 1/2 months Other (specify)						
PROPOSED Division/Unit: Math & Physical Science					Job Vacancy No.: (if applicable) 1203 F 021	
Job Title/Position: Instructor of Math					Specialized Area: Math	
Budgeted Position?					Funded in which FY? FY19	
Budget Number: 1110-14305-6091-100 37.5% 1110-14608-6091-100					Position No. (NBAPOSN): MATO10	
Compensation:	Annual		Sched _	AC	62.500	Hourly Rate: (Part-time only)
s 70,735	Hourly		Grade _1	16		\$ <u>\text{NA} \text{ per hr x } \text{ hrs/wk x } \text{ wks = } \$ \text{ per year }</u>
Start Date: 01/01/19	Other (expl	un)	Step _	At-will-c		If temporary, anticipated termination date:
V1/V1/19 Position is funded for the following number of months/weeks:						
O 9 months O 10 1/2 months O 12 months O Other (specify)						
Explanation of Action: ASSUME division their duties						
Part III: Position/Budget Authorization						
Recommended by Supervisor/Department Head Date Approved by Dean					Date	
Approved by Division Chair Date App					ved by Vice Pre	Date 12-14-18
Approved by Cabinet Level Supervisor Date Reviewed by Huma						
Budget Approval		16	2/19	te Appro	becky	Date C. Meliko 1-2-19