

Banner ID #	Last Name Usman, Shazia	First	Middle Initial	Telephone
Address		City		State Zip

Part I: Check all that apply

<input type="radio"/> Administrative/Professional Staff <input checked="" type="radio"/> Faculty <input checked="" type="radio"/> Support Staff <input type="radio"/> Temporary <input checked="" type="radio"/> Regular	<input checked="" type="radio"/> Full-Time <input type="radio"/> Part-Time	<input type="checkbox"/> New Employee <input type="checkbox"/> Extension <input type="checkbox"/> Salary Adjustment <input type="checkbox"/> Separation (date: _____)	<input checked="" type="checkbox"/> Other (explain) Change in contract length from 9 month to 10.5 month
--	---	--	--

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: Allied Health	Job Vacancy No.: (if applicable) 2101 F 003
Job Title/Position: Instructor of Associate Degree Nursing	Specialized Area: ADN
Budgeted Position? <input checked="" type="radio"/> Yes <input type="radio"/> No	Funded in which FY? FY21
Budget Number: 1110-14181-6091-102	Position No. (NBAPOSN): ADN012
Compensation: \$ 55,550	<input checked="" type="radio"/> Annual <input type="radio"/> Hourly <input type="radio"/> Other (explain)
Sched FAC Grade 1 Step 20	Hourly Rate: (Part-time only) \$ n/a per hr x n/a hrs/wk x n/a wks = \$ n/a per year
Start Date: 08/23/21	End Date: n/a
	<input 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: <input checked="" type="radio"/> 9 months <input type="radio"/> 10 1/2 months <input type="radio"/> 12 months <input type="radio"/> Other (specify)	

PROPOSED Division/Unit: Allied Health	Job Vacancy No.: (if applicable) 2107 F 026
Job Title/Position: Instructor of Associate Degree Nursing	Specialized Area: ADN
Budgeted Position? <input checked="" type="radio"/> Yes <input type="radio"/> No	Name of Replaced Employee: Sandra Davis
Budget Number: 1110-14181-6091-102	Funded in which FY? FY22
Budget Number: 1110-14181-6091-102	Position No. (NBAPOSN): ADN010
Compensation: \$ 64,807	<input checked="" type="radio"/> Annual <input type="radio"/> Hourly <input type="radio"/> Other (explain)
Sched FAC Grade 1 Step 20	Hourly Rate: (Part-time only) \$ n/a per hr x n/a hrs/wk x n/a wks = \$ n/a per year
Start Date: 08/23/21	End Date: n/a
	<input 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: <input type="radio"/> 9 months <input checked="" type="radio"/> 10 1/2 months <input type="radio"/> 12 months <input type="radio"/> Other (specify)	

Explanation of Action:

Part III: Position/Budget Authorization

Recommended by Supervisor/Department Head <i>[Signature]</i>	Date 7/14/21	Approved by Dean <i>[Signature]</i>	Date
Approved by Division Chair <i>[Signature]</i>	Date 7-14-2021	Approved by Vice President <i>[Signature]</i>	Date 7-15-21
Approved by Cabinet Level Supervisor <i>[Signature]</i>	Date	Reviewed by Human Resources <i>[Signature]</i>	Date 7-20-21
Budget Approval <i>[Signature]</i>	Date 07/22/2021	Approved by President <i>[Signature]</i>	Date 7-26-21