

Personnel Action Form
Human Resources

Banner ID # @	Last Name Kolacny, Stephanie	First Stephanie	Middle Initial	Telephone
Address		City	State	Zip

Part I: Check all that apply

Classification: <input checked="" type="radio"/> Administrative/Professional Staff <input type="radio"/> Faculty <input 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 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? Yes No Funded in which FY? _____

Budget Number: _____ Position No. (NBAPOSN): _____

Compensation:	<input type="radio"/> Annual <input type="radio"/> Hourly <input type="radio"/> Other (explain)	Sched _____ Grade _____ Step _____	Hourly Rate: (Part-time only) \$ _____ per hr x _____ hrs/wk x _____ wks = \$ _____ per year
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Start Date: _____ End Date: _____ At-will-employee
 Per contract If temporary, anticipated termination date: _____

Position is funded for the following number of months/weeks:
 9 months 10 ½ months 12 months Other (specify) _____

PROPOSED Division/Unit: **Student Success** Job Vacancy No.: (if applicable) **2203 A 013**

Job Title/Position: **Academic Advisor** Specialized Area: **Academic and Career Advising**

Budgeted Position? Yes No Name of Replaced Employee: **Alexis Brooks** Funded in which FY? **FY22**

Budget Number: **1210-14107-6093-501** Position No. (NBAPOSN): **AVR008**

Compensation:	<input checked="" type="radio"/> Annual <input type="radio"/> Hourly <input type="radio"/> Other (explain)	Sched A Grade 05 Step 10	Hourly Rate: (Part-time only) \$ n/a per hr x n/a hrs/wk x n/a wks = \$ n/a per year
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Start Date: **06/27/22** At-will-employee
 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: _____

Part III: Position/Budget Authorization

Recommended by Supervisor/Department Head Michael Adkins <small>Digitally signed by Michael Adkins DN: cn=Michael Adkins, o, ou, email=adkinsm@wcjc.edu, c=US Date: 2022.06.01 10:35:54 -0500</small>	Date	Approved by Dean Lindsey McPherson <small>Digitally signed by Lindsey McPherson DN: cn=Lindsey McPherson, o=WCJC, ou, email=lmcpherson@wcjc.edu, c=US Date: 2022.06.01 11:26:33 -0500</small>	Date
Approved by Division Chair	Date	Approved by Vice President Leigh Ann Collins <small>Digitally signed by Leigh Ann Collins Date: 2022.06.01 15:30:50 -05'00'</small>	Date
Approved by Cabinet Level Supervisor	Date	Reviewed by Human Resources <i>[Signature]</i>	Date
Budget Approval <i>[Signature]</i>	Date 06/14/2022	Approved by President <i>[Signature]</i>	Date 6-14-22