

## **Personnel Action Form**

Human Resources

Banner ID #	Last Name Moran, Justin D.	First	Middle Init	ial Telephone
Address	×		City	State Zip
Part I: Check all that apply				
Classification: Administrative/Professional Security Support Staff	Staff Extensi	✓ New Employee ☐ Other (e ☐ Extension ☐ Salary Adjustment		rplain)
Temporary Full-T Part-T	ime Separat	tion (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.  Job Vacancy No.: (if applicable)				
CURRENT Division/Unit:				300 Vacancy 140 (If applicable)
Job Title/Position:				Specialized Area:
Budgeted Position? O Yes O No				Funded in which FY?
Budget Number:				Position No. (NBAPOSN):
Compensation:	Annual O Hourly	Sched		Hourly Rate: (Part-time only)  \$per hr xhrs/wk xwks =
\$	Other (explain)	Step	4 mill annularia	\$per year
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  Other (specify)				
PROPOSED Division/Unit: Vocational Science/Instruction				Job Vacancy No.: (if applicable) 2409 F 036
Job Title/Position: Instructor of Law Enforcement				Specialized Area: Law Enforcement
Budgeted Position?				Funded in which FY? FY25
Budget Number: 1110-14024-6091-102 50% 1210-14024-6091-102 50% Position No. (NBAPOSN): LAW002				
Compensation: \$ 71,403	Annual Hourly	Hourly Grade 1		Hourly Rate: (Part-time only)   \$ n/aper hr xn/a hrs/wk xn/a wks =
	Other (explain)	Step 10	At-will-employee	\$ n/a per year  If temporary, anticipated termination date:
Start Date: 01/06/25			Per contract	n/a
Position is funded for the following number of months/weeks:  9 months  10 ½ months  Other (specify)				
Explanation of Action:				
Part III: Position/Budget Authorization				
Timothy Guin Digitally signed by Timothy Guin			Approved by Dean  Danny Bacc	Date Digitally signed by Danny Bacot
Approved by Division Chair	, , , , , , , , , , , , , , , , , , , ,			
Timothy Guin  Digitally signed by Timothy Guin Date: 2024.12.09 09:29:34 -06'00'				
Approved by Cabinet Level Supervisor Date Reviewed by				
Sun			Muhel	Tahnsen 12-11-24
Budget Approval	1 -m c 1	Date	Approved by Preside	Date/ Neled 12-11-24  Revised May 29, 2014
Reg. 821 HR Requisitio	n Number F 2412	0068	-yury 1	Revised May 29, 2014