



Banner ID # _____ @	Last Name Novak, Kerri	First	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 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 title/assignment
<input checked="" type="radio"/> Full-Time <input type="radio"/> Part-Time		

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: Administration	Job Vacancy No.: (if applicable) 1501 S 006
Job Title/Position: Human Resources Specialist	Specialized Area: Human Resources
Budgeted Position? <input checked="" type="radio"/> Yes <input type="radio"/> No	Funded in which FY? FY20
Budget Number: 1110-117-6093-6002	Position No. (NBAPOSN): SPC019
Compensation: \$ 36,150	<input checked="" type="radio"/> Annual <input type="radio"/> Hourly <input type="radio"/> Other (explain)
Start Date: 08/04/14	End Date: n/a <input checked="" type="radio"/> At-will-employee <input type="radio"/> Per contract
	Hourly Rate: (Part-time only) \$ n/a per hr x n/a hrs/wk x n/a wks = \$ n/a per year
	If temporary, anticipated termination date: n/a

Position is funded for the following number of months/weeks:
 9 months 10 1/2 months 12 months Other (specify)

PROPOSED Division/Unit: Administration	Job Vacancy No.: (if applicable) 2005 A 007
Job Title/Position: Human Resources Coordinator	Specialized Area: Human Resources
Budgeted Position? <input checked="" type="radio"/> Yes <input type="radio"/> No	Name of Replaced Employee: Deborah Popek
Budget Number: 1110-117-6093-6002	Position No. (NBAPOSN): CRD022
Compensation: \$ 59,402	<input checked="" type="radio"/> Annual <input type="radio"/> Hourly <input type="radio"/> Other (explain)
Start Date: 07/22/20	<input checked="" type="radio"/> At-will-employee <input type="radio"/> Per contract
	Hourly Rate: (Part-time only) \$ n/a per hr x n/a hrs/wk x n/a wks = \$ n/a per year
	If temporary, anticipated termination date: n/a

Position is funded for the following number of months/weeks:
 9 months 10 1/2 months 12 months Other (specify)

Explanation of Action:

Part III: Position/Budget Authorization

Recommended by Supervisor/Department Head <i>July J. Jones</i> 7-7-2020	Date	Approved by Dean	Date
Approved by Division Chair	Date	Approved by Vice President	Date
Approved by Cabinet Level Supervisor <i>July J. Jones</i> 7-7-2020	Date	Reviewed by Human Resources	Date
Budget Approval <i>B. Novak</i> 7/8/2020	Date	Approved by President <i>Betty A. McCreed</i> 7-7-20	Date