

Banner ID # @	Last Name Taylor, Wanda F	First	Middle Initial	Telephone
Address		City	State	Zip

**Part I: Check all that apply**

Classification: <input type="radio"/> Administrative/Professional Staff <input checked="" type="radio"/> Faculty <input type="radio"/> Support Staff <input type="radio"/> Temporary <input checked="" type="radio"/> Regular	<input type="radio"/> Full-Time <input checked="" 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)  <b>Change in Title/Assignment</b>
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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.

<b>CURRENT</b> Division/Unit: Allied Health	Job Vacancy No.: (if applicable) 2104 F 011
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Job Title/Position: Instructor of Vocational Nursing	Specialized Area: Vocational Nursing
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Budgeted Position? <input checked="" type="radio"/> Yes <input type="radio"/> No	Funded in which FY? FY23
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Budget Number: 1110-14184-6091-102	Position No. (NBAPOSN): LVN002
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Compensation: \$ 68,734	<input checked="" type="radio"/> Annual <input type="radio"/> Hourly <input type="radio"/> Other (explain)	Sched <u>FAC</u> Grade <u>1</u> Step <u>11</u>	Hourly Rate: (Part-time only) \$ <u>n/a</u> per hr x <u>n/a</u> hrs/wk x <u>n/a</u> wks = \$ <u>n/a</u> per year
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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
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Position is funded for the following number of months/weeks:  
 9 months  10 ½ months  12 months  Other (specify)

<b>PROPOSED</b> Division/Unit: Allied Health	Job Vacancy No.: (if applicable) 2301 F 004
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Job Title/Position: Simulation Lab Coordinator	Specialized Area: Associate Degree Nursing
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Budgeted Position? <input checked="" type="radio"/> Yes <input type="radio"/> No	Name of Replaced Employee: Sherrie Hardin	Funded in which FY? FY23
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Budget Number: 1110-14181-6091-102	Position No. (NBAPOSN): ADC001
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Compensation: \$ 51,050	<input checked="" type="radio"/> Annual <input type="radio"/> Hourly <input type="radio"/> Other (explain)	Sched <u>FAC</u> Grade <u>1</u> Step <u>10</u>	Hourly Rate: (Part-time only) \$ <u>n/a</u> per hr x <u>n/a</u> hrs/wk x <u>n/a</u> wks = \$ <u>n/a</u> per year
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Start Date: 08/21/23	<input checked="" type="checkbox"/> At-will-employee <input checked="" type="checkbox"/> Per contract	If temporary, anticipated termination date: n/a
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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 <b>Sandra Davis</b> Digitally signed by Sandra Davis Date: 2023.05.08 10:53:47 -05'00'	Date	Approved by Dean <b>Donald S Smith</b> Digitally signed by Donald S Smith Date: 2023.05.08 11:44:50 -05'00'	Date
Approved by Division Chair <b>Carol Derkowski</b> Digitally signed by Carol Derkowski Date: 2023.05.08 11:37:16 -05'00'	Date	Approved by Vice President <b>Leigh Ann Collins</b> Digitally signed by Leigh Ann Collins Date: 2023.05.09 09:59:27 -05'00'	Date
Approved by Cabinet Level Supervisor	Date	Reviewed by Human Resources <i>Rachel Johnson</i> 5/11/23	Date
Budget Approval <i>B. Skocic</i>	Date 05/10/2023	Approved by President <i>Boyd McLeod</i> 5-11-23	Date