

## Personnel Action Form

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Banner ID #	Last Name Adkins, Obie II	First	N	Middle Initial	Telephone	
Address			Cit	у	State Zip	
Part I: Check all that apply						
Classification:     Administrative/Professional Staff     Faculty     Support Staff     Temporary     Regular     Part-Time     Regular     Part-Time     Regular				Other (explain)		
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 a	Specialized Area:	
Budgeted Position? O Yes O No				Funded in w	Funded in which FY?	
Budget Number:				Position No.	(NBAPOSN):	
Compensation:	O Annual	Sched _			(Part-time only)	
s	Hourly Grade				\$per hr x hrs/wk x wks = \$per year	
Start Date	Other (explain) End Date:	Step At-will-e			If temporary, anticipated termination date	
O Per contract						
Position is funded for the following number of months/weeks.  O 9 months  O 10 ½ months  O 12 months  O Other (specify)						
PROPOSED Division/Unit:Job Vacancy No.: (if applicable)Vocational Sciences1808 F 051						
Job Title/Position: Instructor of EMS				Specialized / EMS	Area:	
Budgeted Position?						
Budget Number: 1110-14026-6091-102 Position No. (NBAPOSN): EMT004						
Compensation:	Annual Sched FAC				(Part-time only)	
s 50,050	Other (explain)	Grade <u>1</u> Step <u>1</u>			r hr x hrs/wk x wks = rr year	
Start Date. 01/14/19	Other (explain)		At-will-empl	· -	, anticipated termination date:	
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 Date Approved by Dean Date						
Gary Bonewald  Description of the Control of the Co						
Approved by Division Chair  Date  Dignally signed by Timothy Guin  Division Chair au-VOCS official-guint Barder Boul College  Division Chair au-VOCS official-guint Barder Boul Cha				Approved by Vice President Date		
Timothy Guin	Date 2018 11 01 20 13 29 -05'00'	Ann collins	Digrawy signed by Leigh Annicolina  Dhubes, eigh Annicolans, patwickid, bu-VPT emails accomo@wnyc edw natus  Date, 2018 11,02 12,09,14, OSDC!			
Approved by Cabinet Level Supervis	sor	Da	te Reviewed	by Human Resources	Date 11-9/8	
Budget Approval Date			te Approved	Approved by President Date		
3. Place		11/9/18		Best U. V.	no Cufw 11-9-18	