

Personnel Action Form

Banner ID#	Last Name Davis, Sandra	First		Middle Ir	nitial	Telephone	Resources
Address				City State Zip			ip
Part I: Check all that apply							
Classification: Administrative/Professional Faculty Support Staff	New Employee ☐ Extension ✓ Salary Adjustment		Other (Other (explain)			
O Temporary O Regular O Part-1	Separation (date:)						
Part II: Assignment/Accounting All Administrative/Professional and Support Staff employees are at-will	Faculty (Contract) ar				oyed according t	to WCJC Policies and Proc	
CURRENT Division/Unit: Allied Health					Job Vacancy No.: (if applicable) 1312-F-097		
Job Title/Position: Instructor of Associate Degree Nursing					Specialized Area: Nursing		
Budgeted Position? • Yes • No					Funded in which FY? FY16		
Budget Number: 1110.14181.6091.102					Position No. (NBAPOSN): ADNO10		
Compensation: \$ 64,224	Annual Hourly Other (explain	Scho Grad in) Step	de 1		\$ NA per	(Part-time only) hr x NA hrs/wk x NA	wks =
Start Date: 01-21-15	End Date: NA			At-will-employee Per contract	If temporary, NA	anticipated termination da	te:
Position is funded for the following 9 months 10 ½ mo	number of months/we	_	(specify)				
PROPOSED Division/Unit: Allied Health					Job Vacancy No.: (if applicable) 1312-F-097		
Job Title/Position: Instructor of Associate Degree Nursing					Specialized Area: Nursing		
Budgeted Position? Yes No Name of Replaced Employee: NA					Funded in which FY? FY17		
Budget Number: 1110.14181.6091.102					Position No. (NBAPOSN): ADNO10		
Compensation: 3512 \$-64,807 55,550	. Annual O Hourly Other (explain	Sched FAC			Hourly Rate: (Part-time only) \$ NA per hr x NA hrs/wk x NA wks = \$ NA per year		
Start Date: 08-22-16	Other (expla	ш) Голер		- At-will-employee Per contract		anticipated termination da	te:
Position is funded for the following 9 months 10 ½ mon		-	(specify)				
Explanation of Action: Adjustment for longevity as a	greed upon Febr	uary/March 20	15				
Part III: Position/Budget Authoriz							
Recommended by Supervisor/Department Head Date			Approved by Dean Date				
Approved by Division Chair			Date App		pproved by Vice President Date		
Approved by Cabinet Level Supervisor			Date Review		Piewed by Human Resources Date 1		
Budget Approval			7/B/16 Approved by Pre		lent Mela	eke) 7-11-	Date / G
Reg. 821 HR Requisition	Number = 1 (05 000	3	7	I LELL	Revised May	29. 2014

Vice President of Instruction
Date: 33116 antial TC