



Banner ID #	Last Name Williams, Vershonda	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 (Part Time to Full Time)
<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: Student Services	Job Vacancy No.: (if applicable) 1312 A 030
Job Title/Position: Part Time Academic Advisor	Specialized Area: Counseling/Advising
Budgeted Position? <input checked="" type="radio"/> Yes <input type="radio"/> No	Funded in which FY? FY16
Budget Number: 1210-14101-6094-503	Position No. (NBAPOSN): COUS99
Compensation: \$ 25.00	<input type="radio"/> Annual <input checked="" type="radio"/> Hourly <input type="radio"/> Other (explain)
Start Date: 03/17/14	End Date: N/A
	<input checked="" type="radio"/> At-will-employee <input type="radio"/> Per contract
Hourly Rate: (Part-time only) \$ 25.00 per hr x 19 hrs/wk x 49 wks = \$ 23,275 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) 49 weeks

PROPOSED Division/Unit: Student Services	Job Vacancy No.: (if applicable) 1602 A 002
Job Title/Position: Academic Advisor-Sugar Land	Specialized Area: Counseling/Advising
Budgeted Position? <input checked="" type="radio"/> Yes <input type="radio"/> No	Name of Replaced Employee: Kristen Ross
Budget Number: 1610-14101-6093-503	Position No. (NBAPOSN): AVR003
Compensation: \$ 55,402	<input checked="" type="radio"/> Annual <input type="radio"/> Hourly <input type="radio"/> Other (explain)
Start Date: 05/23/16	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 _____ hrs/wk x _____ wks = \$ _____ 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>[Signature]</i>	Date 5/13/16	Approved by Dean	Date
Approved by Division Chair <i>[Signature]</i>	Date	Approved by Vice President <i>[Signature]</i>	Date
Approved by Cabinet Level Supervisor <i>[Signature]</i>	Date	Reviewed by Human Resources <i>[Signature]</i>	Date 05/20/16
Budget Approval <i>[Signature]</i>	Date 5/20/16	Approved by President <i>[Signature]</i>	Date 5-20-16

[Handwritten initials]