Wharton County Junior College

Personnel Action Form

Human Resources

Banner ID # / @	Last Name	First	Middle Initial	Telephone
	Hofer, Shannon L			

Address | City | State | Zip

Part I: Check *all* that apply

Classification:
- ○ Administrative/Professional Staff
- ◉ Faculty
- ○ Support Staff

○ Temporary ◉ Full-Time
◉ Regular ○ Part-Time

☑ New Employee
☐ Extension
☐ Salary Adjustment
☐ Separation (date:_____)

☐ 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 Area:

Budgeted Position? ○ Yes ○ No

Funded in which FY?

Budget Number:

Position No. (NBAPOSN):

Compensation: $

○ Annual ○ Hourly ○ Other (explain)

Sched _____ Grade _____ Step _____

Hourly Rate: (Part-time only)
$ _____ per hr x _____ hrs/wk x _____ wks =
$ _____ per year

Start Date:

End Date:

○ At-will-employee ○ Per contract

If temporary, anticipated termination date:

Position is funded for the following number of months/weeks:
○ 9 months ○ 10 ½ months ○ 12 months ○ Other (specify)

PROPOSED Division/Unit: Academic Affairs

Job Vacancy No.: (if applicable) 2506 F 035

Job Title/Position: Counselor

Specialized Area: Counseling and Disability Services

Budgeted Position? ◉ Yes ○ No

Name of Replaced Employee: Shannon Glardon

Funded in which FY? FY26

Budget Number: 1610-14101-6093-503

Position No. (NBAPOSN): COU004

Compensation: $ 72,737

◉ Annual ○ Hourly ○ Other (explain)

Sched FAC Grade 1 Step 10

Hourly Rate: (Part-time only)
$ n/a per hr x n/a hrs/wk x n/a wks =
$ n/a per year

Start Date: 10/22/25

☐ At-will-employee ◉ Per contract

If temporary, anticipated termination date: n/a

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
Amber Barbee — Digitally signed by Amber Barbee Date: 2025.09.09 13:15:36 -05'00'

Approved by Dean — Date
Lindsey McPherson — Digitally signed by Lindsey McPherson Date: 2025.09.09 15:30:31 -05'00'

Approved by Division Chair — Date

Approved by Vice President — Date
Leigh Ann Collins — Digitally signed by Leigh Ann Collins Date: 2025.09.10 12:12:02 -05'00'

Approved by Cabinet Level Supervisor — Date

Reviewed by Human Resources — Date
Rachel Dahmen 9-17-25

Budget Approval — Date
Cynthia Ward 9.16.25

Approved by President — Date
09/19/25

Reg. 821 HR Requisition Number H 2509 0048

Revised May 29, 2014