



Wharton County Junior College

Personnel Action Form Human Resources

Banner ID # @	Last Name Anderson, Thomas	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 type="radio"/> Regular	<input checked="" type="checkbox"/> New Employee <input type="checkbox"/> Extension <input type="checkbox"/> Salary Adjustment <input type="checkbox"/> Separation (date: _____)	<input type="checkbox"/> Other (explain)
<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:		Job Vacancy No.: (if applicable)	
Job Title/Position:		Specialized Area:	
Budgeted Position? <input type="radio"/> Yes <input type="radio"/> No		Funded in which FY?	
Budget Number:		Position No. (NBAPOSN):	
Compensation:	<input type="radio"/> Annual <input type="radio"/> Hourly <input type="radio"/> Other (explain)	Sched _____ Grade _____ Step _____	Hourly Rate: (Part-time only) \$ _____ per hr x _____ hrs/wk x _____ wks = \$ _____ per year
Start Date:	End Date:	<input checked="" type="radio"/> At-will-employee <input type="radio"/> 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:		Job Vacancy No.: (if applicable)	
Vocational Science / Vocational Instruction		2512 F 059	
Job Title/Position:		Specialized Area:	
Instructor of Emergency Medical Services (Temporary)		EMS	
Budgeted Position? <input checked="" type="radio"/> Yes <input type="radio"/> No	Name of Replaced Employee:	Funded in which FY? FY26	
Budget Number:	1210-14026-6091-102	Position No. (NBAPOSN): EMT08T	
Compensation:	<input checked="" type="radio"/> Annual <input type="radio"/> Hourly <input type="radio"/> 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:	02/18/26	<input checked="" type="radio"/> At-will-employee <input type="radio"/> 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)

Explanation of Action:

Part III: Position/Budget Authorization

Recommended by Supervisor/Department Head	Date	Approved by Dean	Date
Karl Johnson			
Digitally signed by Karl Johnson Date: 2026.01.29 17:54:43 -06'00'			
Approved by Division Chair	Date	Approved by Vice President	Date
Gary Bonewald		Leigh Ann Collins	
Digitally signed by Gary Bonewald Date: 2026.02.03 09:39:13 -06'00'		Digitally signed by Leigh Ann Collins Date: 2026.02.04 08:37:05 -06'00'	
Approved by Cabinet Level Supervisor	Date	Reviewed by Human Resources	Date
Budget Approval	Date	Approved by President	Date
	2.4.26		02/09/26