



Banner ID #	Last Name Porras, Andrew "Trey"	First Trey	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 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
<input type="radio"/> Full-Time <input checked="" 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: Administration	Job Vacancy No.: (if applicable) 1805 S 034
Job Title/Position: Temporary Assistant Baseball Coach	Specialized Area: Athletics-Baseball
Budgeted Position? <input checked="" type="radio"/> Yes <input type="radio"/> No	Funded in which FY? FY19
Budget Number: 3914-354-6131-901	Position No. (NBAPOSN): ABC01T
Compensation: \$ 18,000*	<input type="radio"/> Annual <input type="radio"/> Hourly <input checked="" type="radio"/> Other (explain)
Start Date: 08/20/18	End Date: <input checked="" type="radio"/> At-will-employee <input type="radio"/> Per contract
Hourly Rate: (Part-time only) \$ n/a per hr x n/a hrs/wk x n/a wks = \$ n/a per year	
If temporary, anticipated termination date:	

Position is funded for the following number of months/weeks:
 9 months 10 1/2 months 12 months Other (specify)

PROPOSED Division/Unit: Administration	Job Vacancy No.: (if applicable) 1908 F 046
Job Title/Position: Head Baseball Coach	Specialized Area: Athletics-Baseball
Budgeted Position? <input checked="" type="radio"/> Yes <input type="radio"/> No	Name of Replaced Employee: Keith Case
Budget Number: 1110-14309-6091-100 70.9%, 3914-354-6091-901 29.10%	Funded in which FY? FY20
Budget Number:	Position No. (NBAPOSN): BBC001
Compensation: \$ 48,550	<input checked="" type="radio"/> Annual <input type="radio"/> Hourly <input type="radio"/> Other (explain)
Start Date: 08/19/19	End Date: <input checked="" type="radio"/> At-will-employee <input checked="" type="radio"/> Per contract
Hourly Rate: (Part-time only) \$ n/a per hr x n/a hrs/wk x n/a wks = \$ n/a 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>Keith Case</i>	Date 8/23/19	Approved by Dean	Date
Approved by Division Chair	Date	Approved by Vice President	Date
Approved by Cabinet Level Supervisor <i>Betty A. Melnick</i>	Date 9-3-19	Reviewed by Human Resources <i>Jeff Jones</i>	Date 8-29-19
Budget Approval <i>B. Kocian</i>	Date 8/28/19	Approved by President <i>Betty A. Melnick</i>	Date 9-3-19