

Banner ID # @	Last Name Reeve, Joseph L	First Joseph	Middle Initial	Telephone
Address		City	State	Zip

**Part I: Check all that apply**

Classification: <input type="radio"/> Administrative/Professional Staff <input type="radio"/> Faculty <input type="radio"/> Support Staff	<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 type="radio"/> Temporary <input checked="" type="radio"/> Regular	<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.

<b>CURRENT</b> 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 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: <input type="radio"/> 9 months <input type="radio"/> 10 1/2 months <input type="radio"/> 12 months <input type="radio"/> Other (specify)	

<b>PROPOSED</b> Division/Unit: Instruction	Job Vacancy No.: (if applicable) 2209 F 051
Job Title/Position: Instructor of Biology	Specialized Area: Life Sciences
Budgeted Position? <input checked="" type="radio"/> Yes <input type="radio"/> No	Name of Replaced Employee: Jennifer Jeffery
Budget Number: 1110-14301-6091-100	Funded in which FY? FY23
Compensation: \$ 28,275 <input checked="" type="radio"/> Annual <input type="radio"/> Hourly <input type="radio"/> Other (explain)	Sched F _____ Grade 07 _____ Step 8 _____ Hourly Rate: (Part-time only) \$ n/a per hr x n/a hrs/wk x n/a wks = \$ n/a per year
Start Date: 01/09/23	<input checked="" type="checkbox"/> At-will-employee <input checked="" type="checkbox"/> Per contract
If temporary, anticipated termination date:	
Position is funded for the following number of months/weeks: <input checked="" type="radio"/> 9 months <input type="radio"/> 10 1/2 months <input type="radio"/> 12 months <input type="radio"/> Other (specify)	

Explanation of Action:  
(\$56,550 Annually 9 Mo.; \$28,275-starting Spring 2023)

**Part III: Position/Budget Authorization**

Recommended by Supervisor/Department Head <b>Kim Raun</b> Digitally signed by Kim Raun Date: 2022.11.18 11:39:55 -06'00'	Date	Approved by Dean	Date
Approved by Division Chair <b>Kevin Dees</b> Digitally signed by Kevin Dees Date: 2022.11.21 09:16:14 -06'00'	Date	Approved by Vice President <b>Leigh Ann Collins</b> Digitally signed by Leigh Ann Collins Date: 2022.11.21 12:15:51 -06'00'	Date
Approved by Cabinet Level Supervisor	Date	Reviewed by Human Resources	Date
Budget Approval <b>B. Kocian</b>	Date 11/21/2022	Approved by President <b>Boyd A. McCreedy</b>	Date 11/28/22