

Personnel Action Form

Human Resources

Banner ID #	Last Name Falcon	First Jessica	Middle Ini R	tial Telephone	
Address			Citv	State Zip TX 77437	
Part I: Check all that apply					
Administrative/Professional Staff Faculty Support Staff Temporary Full-Time		New Employee Extension Salary Adjustment Separation (date:	Other (e	xplain)	
Regular O 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)					
CURRENT Division/Unit: TRIO Student Support Services Grant				1509 A 008	
Job Title/Position: TRIO Student Support Services Project Director				Specialized Area: TRIO Grant	
Budgeted Position? • Yes • No				Funded in which FY? FY18	
Budget Number: 21172-6055-6185-400				Position No. (NBAPOSN): GND06T	
Compensation: \$ 65,400	O Annual Hourly Other (explain)	Sched CA Grade 4 Step	_	Hourly Rate: (Part-time only) \$ N/A	
Start Date: 09/01/15	End Date: N/A		At-will-employee Per contract	If temporary, anticipated termination date: 08/31/18	
Position is funded for the following number of months/weeks: O 9 months 10 ½ months O ther (specify)					
PROPOSED Division/Unit: TRIO Student Support Services Grant				Job Vacancy No.: (if applicable) 1509 A 008	
Job Title/Position: TRIO Student Support Services Project Director				Specialized Area: TRIO Grant	
Budgeted Position? • Yes • No Name of Replaced Employee:				Funded in which FY? FY19	
Budget Number: 21176055-6185-400				Position No. (NBAPOSN): GND06T	
Compensation: \$ 66,735	Other (explain)	Sched CA Grade 4 Step 10	2 1	Hourly Rate: (Part-time only) \$ \frac{N/A}{per \text{ pr year}} \text{ prs/wk x } \frac{N/A}{max} \text{ wks} = \$ \frac{N/A}{max} \text{ per year}	
Start Date: 9/01/18	To a man (any man)		At-will-employee Per contract	If temporary, anticipated termination date: 08/31/19	
Position is funded for the following number of months/weeks: O 9 months 10 ½ months O 12 months O Other (specify)					
Explanation of Action:					
Part III: Position/Budget Authorization					
Recommended by Supervisor/Department Head Date Approved				Date	
Marybelle Perez Observable period Perez of Marybelle Perez of Marybel			Approved by Vice Pr	Approved by Vice President Date	
Approved by Cabinet Level Supervis	Or.	Date	Reviewed by Human		
Approved by Cabinet Level Supervis		Date	Neviewed by duma	9 pres 8 08 30 18	
Budget Approval		8/30//2	Approved by Preside	Date 8:31-18	

Reg. 821

HR Requisition Number 51808 0139

Revised May 29, 2014