

## **Personnel Action Form**

								Humai	n Resources
Banner ID #	Last Name Sealy, Tamara	1	First			Middle In	itial	Telephone	
Address					City			State Zip	
Part I: Check all that apply			V 12.5						
Classification:  O Administrative/Professional Staff  D Statesping					✓ Other (explain)				
Faculty Support Staff	L	Extension Salary Adjustment Cha				Chang	nge in title/assignment		
Temporary Full-T	ime	Separation (date:)							
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: Instruction						Job Vacancy No.: (if applicable) 1303 A 005			
Job Title/Position: Continuing Education Corporate Coordinator						Specialized Area: Continuing Education			
Budgeted Position? • Yes • No						Funded in which FY? FY20			
Budget Number: 1610-14027-6093-103							Position No. (NBAPOSN): CRD016		
Compensation:	<b>O</b> Annual		Sched A					(Part-time only)	
s 61,402	Hourly Grade 1 Other (explain) Step 8						\$ <u>n/a</u> <u>per hr x <u>n/a</u> <u>hrs/wk x <u>n/a</u> <u>wks</u> = \$ <u>n/a</u> <u>per year</u></u></u>		
Start Date: 05/22/13					D		If temporary, anticipated termination date: n/a		
Position is funded for the following number of months/weeks:  O 9 months  10 ½ months  O ther (specify)									
PROPOSED Division/Unit:							Job Vacancy No.: (if applicable) 2005 A 006		
Job Title/Position: Director of Continuing Education						Specialized Area: Continuing Education			
Budgeted Position?  Yes  No Name of Replaced Employee: Alice Atkins						Funded in which FY? FY21			
Budget Number: 1110-14034-6093-401							Position No. (NBAPOSN): DIR022		
Compensation:	Annual Sched CA					Hourly Rate: (Part-time only)  \$ n/a			/2
s 70,068	Hourly   Grade   10						\$ n/a per year wks =		
Start Date: 2010 10 0 0 10 - 10 - 20 7-30-20 At-wi					At-will-em Per contrac		If temporary, anticipated termination date: n/a		
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 Authoriza									
Recommended by Supervisor/Department Head Date				e	Approve	Approved by Dean Date			Date
Approved by Division Chair			Date		7.	proved by Vice President		7-29-20	Date
Approved by Cabinet Level Supervisor Date				e	Reviewe		Reduced (	an elev	Date
Budget Approval		7/2	0/202	1	Approve	Preside	nt O	0	Date
Reg. 821 HR Requisition	Number A 2007	0013		<u> </u>		L) (H	TO THE CHIEF	Revised May	29, 2014

Vice President of Instruction Date: 7/28/20 Initial: T