



**Wharton County
Junior College**

Personnel Action Form

Human Resources

Banner ID # @	Last Name Korenek, Patricia	First	Middle Initial	Telephone
Address		City		State Zip
Part I: Check all that apply				
Classification: ☐ Administrative/Professional Staff ☐ Faculty ☐ Support Staff ☐ Temporary ☒ Regular	☐ New Employee ☐ Extension ☒ Salary Adjustment ☐ Separation (date: _____)	☒ Other (explain) Salary adjustment per BOT approval 10/15/24 (final step)		
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: Allied Health		Job Vacancy No.: (if applicable) n/a		
Job Title/Position: Instructor of Associate Degree Nursing		Specialized Area: Associate Degree Nursing		
Budgeted Position? ☒ Yes ☐ No		Funded in which FY? FY26		
Budget Number: 1110-14181-6091-102		Position No. (NBAPOSN): ADN006		
Compensation: \$ 101,404	☒ Annual ☐ Hourly ☐ Other (explain)	Sched FAC Grade 1 Step 53	Hourly Rate: (Part-time only) \$ n/a per hr x n/a hrs/wk x n/a wks = \$ n/a per year	
Start Date: 08/29/11	End Date: n/a	☐ At-will-employee ☒ Per contract	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)				
PROPOSED Division/Unit: Allied Health		Job Vacancy No.: (if applicable) n/a		
Job Title/Position: Instructor of Associate Degree Nursing		Specialized Area: Associate Degree Nursing		
Budgeted Position? ☒ Yes ☐ No		Funded in which FY? FY26		
Name of Replaced Employee: n/a				
Budget Number: 1110-14181-6091-102		Position No. (NBAPOSN): ADN006		
Compensation: \$ 102,070	☒ Annual ☐ Hourly ☐ Other (explain)	Sched FAC Grade 1 Step 54	Hourly Rate: (Part-time only) \$ n/a per hr x n/a hrs/wk x n/a wks = \$ n/a per year	
Start Date: 09/01/25		☐ At-will-employee ☒ Per contract	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: Salary adjustment per BOT approval 10/15/24 (final step) ✓				
Part III: Position/Budget Authorization				
Recommended by Supervisor/Department Head Sandra Davis Digitally signed by Sandra Davis Date: 2025.09.10 11:36:37 -05'00'		Approved by Dean Date		
Approved by Division Chair Carol J. Derkowski, RDH, MAIE Digitally signed by Carol J. Derkowski, RDH, MAIE Date: 2025.09.10 08:50:18 -05'00'		Approved by Vice President Leigh Ann Collins Digitally signed by Leigh Ann Collins Date: 2025.09.10 13:24:02 -05'00'		
Approved by Cabinet Level Supervisor		Reviewed by Human Resources		
Budget Approval Cynthia Wood Date 9.16.25		Approved by President Mandell Date 09/19/25		