

Personnel Action Form

Human Resources

Banner ID #	Last Name Johnlouis, Armad	First	Middle Ini	tial Telephone
Address			City	State Zip
Part I: Check all that apply				
Classification: Administrative/Professional Faculty Support Staff	☐ Salary	on Adjustment	Other (e	xplain)
Temporary Full-7 Regular Part-7		ion (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:				Job Vacancy No.: (if applicable)
Job Title/Position:				Specialized Area:
Budgeted Position? Yes No				Funded in which FY?
Budget Number:				Position No. (NBAPOSN):
Compensation:	Annual Hourly	Sched		Hourly Rate: (Part-time only) \$ per hr x hrs/wk x wks = \$ per year
Start Date:	Other (explain) End Date:		At-will-employee	If temporary, anticipated termination date:
P. 11 1 C. 1 1 C. 4 C. 11		OF	Per contract	
Position is funded for the following number of months/weeks: 9 months 10 ½ months Other (specify)				
PROPOSED Division/Unit: Enrollment Management & Registrar				Job Vacancy No.: (if applicable) 2506 A 020
Job Title/Position: Assistant Director of Financial Aid				Specialized Area: Financial Aid
Budgeted Position? • Yes • No Name of Replaced Employee: Rachel Cavazos				Funded in which FY? FY25
Budget Number: 1110-13024-6093-501 Position No. (NBAPOSN): ADR001				
Compensation:	Annual Hourly	Sched AA Grade 1		Hourly Rate: (Part-time only) \$ _n/aper hr xn/a hrs/wk xn/a wks =
3 00,404	Other (explain)	Step 8	At-will-employee	\$ n/a per year If temporary, anticipated termination date:
Start Date: 09/22/25			Per contract	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 Authorization Recommended by Supervisor/Department Head Date Approved by Dean Date				
Priscilla Salas Digitally signed by Priscilla Salas Date: 2025.08.06 09:37:34 -05'00' Jerry Martin				. Date: 2020:00:00 10:00:20 00 00
Approved by Division Chair Date Approved by Vice President Digitally signed by Amanda A. Allen Date: 2025.08.08 07:14:47 -05'90'				
Approved by Cabinet Level Supervisor Date Reviewed by Human Resources Date				
	a. Me Crohan	8/11/25	Approved by Preside	Meluele 8-13-25
Reg. 821 HR Requisitio	n Number A 2508 0	017	/	Revised May 29, 2014