



**Wharton County  
Junior College**

**Personnel Action Form**  
Human Resources

Banner ID # @	Last Name Steffek, Bethany	First	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 type="radio"/> Temporary <input type="radio"/> Regular	<input checked="" type="radio"/> Full-Time <input type="radio"/> Part-Time	<input checked="" type="checkbox"/> New Employee <input type="checkbox"/> Extension <input type="checkbox"/> Salary Adjustment <input type="checkbox"/> Separation (date: _____)	<input checked="" type="checkbox"/> Other (explain)  changing from part time faculty to temporary full time faculty
--	---	---	---

**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:

☐ 9 months  
 ☐ 10 ½ months  
 ☐ 12 months  
 ☐ Other (specify)

<b>PROPOSED</b> Division/Unit:		Job Vacancy No.: (if applicable)	
Vocational Science / Vocational Instruction		2601 F 001	
Job Title/Position:		Specialized Area:	
Instructor of Cosmetology (Temporary)		Cosmetology	
Budgeted Position? <input checked="" type="radio"/> Yes <input type="radio"/> No	Name of Replaced Employee: Jacqueline Kuehn		Funded in which FY? FY26
Budget Number: 1110-14022-6091-102		Position No. (NBAPOSN): COS01T	
Compensation:	<input checked="" type="radio"/> Annual <input type="radio"/> Hourly <input type="radio"/> Other (explain)	Sched FAC Grade 1 Step 3	Hourly Rate: (Part-time only) \$ n/a per hr x n/a hrs/wk x n/a wks = \$ n/a per year
Start Date: 01/05/26		<input checked="" type="radio"/> At-will-employee <input checked="" type="radio"/> Per contract	If temporary, anticipated termination date: 08/31/26

Position is funded for the following number of months/weeks:

☐ 9 months  
 ☐ 10 ½ months  
 ☒ 12 months  
 ☐ Other (specify)

Explanation of Action:

**Part III: Position/Budget Authorization**

Recommended by Supervisor/Department Head	Date	Approved by Dean	Date
Approved by Division Chair	Date	Approved by Vice President	Date
Gary Bonewald	Digitally signed by Gary Bonewald Date: 2026.01.27 15:10:18 -06'00'	Leigh Ann Collins	Digitally signed by Leigh Ann Collins Date: 2026.01.27 15:15:54 -06'00'
Approved by Cabinet Level Supervisor	Date	Reviewed by Human Resources	Date
Budget Approval	Date	Approved by President	Date