

Personnel Action Form

Human Resource

Banner ID # .	Last Name Potter, Paris	First	Middle In	itial Telephone
Address	7		City	State Zip
Part I: Check all that apply	<u> </u>			
Classification: Administrative/Professional Staff Faculty Support Staff Temporary Full-Time		New Employee □ Extension □ Salary Adjustment □ Separation (date:)		explain)
© Regular 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)
Job Title/Position:				Specialized Area:
Budgeted Position? O Yes O No				Funded in which FY?
Budget Number:				Position No. (NBAPOSN):
Compensation:	Annual Hourly Other (explain)	Sched Grade Step		Hourly Rate: (Part-time only) \$per hr xhrs/wk xwks = \$per year
Start Date:	End Date:		At-will-employee Per contract	If temporary, anticipated termination date:
Position is funded for the following number of months/weeks: 9 months 10 ½ months Other (specify) PROPOSED Division/Unit: Job Vacancy No.: (if applicable)				
Allied Health/Instruction				2203 F 022
Job Title/Position: Instructor of Associate Degree Nursing				Specialized Area: Associate Degree Nursing
Budgeted Position? Yes No Name of Replaced Employee: Shawna Lindsey				Funded in which FY? FY22
Budget Number: 1110-14181-6091-102				Position No. (NBAPOSN): ADNO07
Compensation: \$ 52,550	Other (explain)	Sched FAC		
Start Date: 08/22/22	Other (explain)	J Step	At-will-employee Per contract	If temporary, anticipated termination date:
Position is funded for the following number of months/weeks: 9 months 10 ½ months 12 months 0 Other (specify)				
Explanation of Action:				
Part III: Position/Budget Authorization Recommended by Supervisor/Department Head Date Approved by Dean Date Date Date				
Andrea Shropshire, DNP, MSN, RN Digitally signed by Andrea Shropshire, DNP, MSN, RN Date: 2022.07.27 09:22:44 -05'00' Approved by Division Chair Date Approved by Vice				President Date
Carol Derkowski Digitally signed by Carol Derkowski Date: 2022.07.27 11:07:47 -05'00'				1870-221
Approved by Cabinet Level Supervisor Date Reviewed by Human Resources Date				
Budget Approval		08/15/202	2 Approved by President	and Date Branch
Reg. 821 HR Requisition	Number F 2207	0048	1	Revised May 29, 2014

Vice President of Instruction
Date: 8 9 22 Initial: