

Personnel Action Form

Ranner ID#	Last Name	First	Man		Hur	nan Resource
Address	Korenek, Patricia A		Middle 1	initial	Telephone	
			City		State	Zip
Part I: Check all that	apply					
Classification:		New Employee	Vother	(ounlain)		
Administrative/P	rofessional Staff	Other (explain)				
Support Staff	-	Salary Adjustment	chang	ge contract	length from	10 5 month
Temporary	O Full-Time	Separation (date:	to 12	month to re	place Amy C	וווטווו ט.ט
• Regular	O Tart Time					
Part II: Assignment/A	ecounting Number of months/weeks essional and Faculty (Contract) and Si	below notes how the no	eition is funded, it do			
All Administrative/Prof	essional and Faculty (Contract) and Si s are at-will employees.	upport Staff (Non-Cont	mct) employees en	not guarantee empl	oyment status for a p	erson.
Support Staff employees	s are at-will employees.		act, employees are empl	oyed according to	WCJC Policies and I	Procedures.
CURRENT Divis	sion/Unit:			Joh Vacanov N	o.: (if applicable)	
Allied Health				1207 F 032	o.: (If applicable)	
lob Title/Position:						
nstructor of Associate Degree Nursing				Specialized Area: Associate Degree Nursing		
Budgeted Position? Yes No				D 111		
Budget Number:	10 44404 0004				1 1 2 0	
	10-14181-6091-102			Position No. (N	BAPOSN): ADN	000
Compensation:	Annual	Sched FAC		House Date of	VDIA	000
74,140	O Hourly	Grade 1	_	Hourly Rate: (Pa	x n/a hrs/wk x	-1-
	Other (explain)	Step 36	-	\$ n/a per ye		n/a wks =
tart Date: 8/29/11	End Date:		At-will-employee			
	n/a	Œ	Per contract	n/a	icipated termination	date:
osition is funded for the	following number of months/weeks:			1		
	10 1/2 months 12 months	Other (specify)				
PROPOSED Divi	sion/Unit:			1-1-11		
llied Health				Job Vacancy No. 2002 F 013	: (if applicable)	
ob Title/Position:						
structor of Associa	te Degree Nursing			Specialized Area	: 	1
udgeted Position?	es ONo Name of Replaced Em	plovee: Amy Can		Associate Deg		
udget Number:		Arriy Cond	over	Funded in which	FY? FY20	1
1110	0-14181-6091-102			Position No. (NB	APOSN): ADNO	200
Compensation:	Annual	Sched FAC		**	ADNO	006
84,734	O Hourly			Hourly Rate: (Part		
	Other (explain)	Step 36	-	\$ <u>n/a</u> per hr x <u>n/a</u> hrs/wk x <u>n/a</u> wks = \$ <u>n/a</u> per year		
art Date: 08/24/2	20		At-will-employee			
		D	Per contract	n/a	cipated termination of	iate:
sition is funded for the f	following number of months/weeks:					
	0 ½ months 12 months	Other (specify)				
planation of Action:						
tricia will be replaci	ng Amy Conover's 12 month of	contract. Amy retir	ed in May 2020			
rt III: Position/Budget	Authorization		,			
commended by Supervis		Date	Approved by Dean			
drea Shropshire DN		MSN, RN o=Whiston County Junior Callege, hirte@urgs.edu, c=US	Transco of Domi			Date
proved by Division Chair	T	Date	Annuaried by IV.			
arol Derkows	Digitally signed by Ca	rol Derkowski	Approved by Vice Pres	sident		Date
proved by Cabinet Level	Date: 2020.07.15 15:0		Laur		7-2	12-21
	menou∎eunificiti (57,557)	Date	Reviewed by Juman R	urces	1000	Date
lget Approval			_ 10	TA YO	res .	21121180
n		Date	Approved by President	011		Date
3.8Macco		27/2020	Roll	-man	2) 0 -	
821 HR Rec	quisition Number 2004	0014	Luya	- mexit	8-19	
					Revised May	29, 2014