

Personnel Action Form

Human Resources

Banner ID #	Last Name Ashburn Kimb				Middle Initial Telephone				
Address					City		State Z	Zip	
Part I: Check all that apply									
		N	mlawa-		1/ Others (
Classification: Administrative/Professional S	New Employee			└ Other (explain)					
Faculty	Extension			Change in Title/Assignment					
Support Staff	Salary Adjustment			Onang	o in ride	ar a signment			
O Temporary O Regular O Part-T	Separation (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:							y No.: (if applicable)		
Instruction						2007 A 008			
Job Title/Position:						Specialized Area:			
Temporary Accessibility and Instructional Media Technologist						Distance Education			
Budgeted Position? • Yes • No						Funded in which FY? FY21			
Budget Number: 21153-6068-6093-501						Position No. (NBAPOSN): DLD02T			
Compensation:	ompensation: O Annual			Sched GN7			Hourly Rate: (Part-time only)		
54 070	Ŏ			Grade 1			$ \underline{n/a} \text{ per hr x } \underline{n/a} \text{ hrs/wk x } \underline{n/a} \text{ wks} = $		
s 54,070	Ö Other (expla					\$ <u>n/a</u> per year			
Start Date: 07/27/20	End Date:		At-will-emplo			If temporary, anticipated termination date: 04/30/21		ite:	
Position is funded for the following number of months/weeks:									
	ths 🖸 12 mo		Other (spe	cify)					
PROPOSED Division/Unit:						Job Vacanc	y No.: (if applicable)		
Instruction						2103 A 011			
Job Title/Position: Accessibility and Instructional Media Technologist						Specialized Area: Distance Education			
Budgeted Position? OYes ONo Name of Replaced Employee: n/a						Funded in which FY? FY21			
Budget Number: 1110-1412-6100-400 110 -1412-6093 400 Position No. (NBAPOSN): DLD002									
Compensation:	O Annual		Sched A		-	Hourly Rat	e: (Part-time only)		
	O Hourly		Grade 1			n/a per hr x n/a hrs/wk x n/a wks =			
s 57,402	Other (expl	ain)				\$ n/a per year			
Start Date:	Other (expl	amj	step _	At-will-en	nplovee		y, anticipated termination da	te.	
05/01/21				Per contra		n/a	y, underpated termination d		
Position is funded for the following number of months/weeks: O 9 months O 10 ½ months O 12 months O Other (specify)									
Explanation of Action:									
Position initially funded with CARES funds and then continued through DE budget after reorganization approval									
Part III: Position/Budget Authoriz:									
Recommended by Supervisor/Department Head Date Approved by Dean Date									
Michele Betancourt Digitally signed by Michele Betancourt Date: 2021.04.08 12:33:04 -05'00'									
Approved by Division ChairDateApproved by Vice PresidentDate $4 - 1 - 2$									
Approved by Cabinet Level Supervisor Date Date Date Date									
Jacke Schmin +- 13-21									
Budget Approval Date Approved by President Date Date									
Reg. 821 HR Requisition	Number A 21	03 000)9)9	y y	un h	<u>ai 110</u>	Revised May	29, 2014	
RECEIVED									
	Vice President of Interaction Date: 483 - Initial:								