

COPY

Personnel Action Form Human Resources

Header section with fields: Banner ID #, Last Name, First, Middle Initial, Telephone, Address, City, State, Zip

Part I: Check all that apply

Classification section with checkboxes for Administrative/Professional Staff, Faculty, Support Staff, Temporary, Regular, Full-Time, Part-Time, New Employee, Extension, Salary Adjustment, Separation, and Other (explain)

Part II: Assignment/Accounting Number of months/weeks below notes how the position is funded; it does not guarantee employment status for a person.

Current position details: ALLIED HEALTH, Job Title: INSTRUCTOR OF ASSOCIATE DEGREE NURSING, Budgeted Position? Yes, Budget Number: 1610 14181.6091.102, Compensation: \$63,050, Start Date: 08-20-2018

Proposed position details: ALLIED HEALTH, Job Title: INSTRUCTOR OF ASSOCIATE DEGREE NURSING, Budgeted Position? Yes, Budget Number: 1610 14181.6091.102, Compensation: \$63,550, Start Date: 08-19-2019

Explanation of Action: ADJUSTMENT FOR LONGEVITY AS AGREED UPON FEBRUARY/MARCH 2015

Part III: Position/Budget Authorization

Authorization section with signature lines for Supervisor, Dean, Division Chair, Cabinet Level Supervisor, and President, including dates and digital signatures.

RECEIVED Vice President of Instruction Date: 7/21/19 Initial: TC

Handwritten initials DP