



Personnel Action Form
Human Resources

Banner ID # _____		Last Name First Middle Initial Telephone _____	
Address _____		City State Zip _____	
Part I: Check all that apply			
Classification: <input type="radio"/> Administrative/Professional Staff <input checked="" type="radio"/> Faculty <input type="radio"/> Support Staff <input checked="" type="radio"/> Temporary <input type="radio"/> Full-Time <input type="radio"/> Regular <input type="radio"/> Part-Time		<input type="checkbox"/> New Employee <input type="checkbox"/> Extension <input type="checkbox"/> Salary Adjustment <input type="checkbox"/> Separation (date: _____) <input checked="" type="checkbox"/> Other (explain) <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">re-classification from TFT to regular FT</div>	
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: Division of Life Sciences/Kinesiology Department		Job Vacancy No.: (if applicable) 1908 F 45	
Job Title/Position: Instructor of Kinesiology - Temporary		Specialized Area: Kinesiology	
Budgeted Position? <input checked="" type="radio"/> Yes <input type="radio"/> No		Funded in which FY? FY20	
Budget Number: 1610.14309.6091.100		Position No. (NBAOSN): KIN02T	
Compensation: \$ 50,050	<input checked="" type="radio"/> Annual <input type="radio"/> Hourly <input type="radio"/> Other (explain)	Sched FAC _____ Grade 1 _____ Step 10 _____	Hourly Rate: (Part-time only) \$ _____ per hr x _____ hrs/wk x _____ wks = \$ _____ per year
Start Date: 8/16/2019	End Date: _____	<input type="radio"/> At-will-employee <input checked="" type="radio"/> Per contract	If temporary, anticipated termination date: 5/17/2020
Position is funded for the following number of months/weeks: <input checked="" type="radio"/> 9 months <input type="radio"/> 10 1/2 months <input type="radio"/> 12 months <input type="radio"/> Other (specify)			
PROPOSED Division/Unit: Division of Life Sciences/Kinesiology Department		Job Vacancy No.: (if applicable) 1908 F 45	
Job Title/Position: Instructor of Kinesiology		Specialized Area: Kinesiology	
Budgeted Position? <input checked="" type="radio"/> Yes <input type="radio"/> No	Name of Replaced Employee: Peggy Fitt		Funded in which FY? FY20
Budget Number: 1610.14309.6091.100		Position No. (NBAOSN): KIN002	
Compensation: \$ 50,050	<input checked="" type="radio"/> Annual <input type="radio"/> Hourly <input type="radio"/> Other (explain)	Sched FAC _____ Grade 1 _____ Step 10 _____	Hourly Rate: (Part-time only) \$ _____ per hr x _____ hrs/wk x _____ wks = \$ _____ per year
Start Date: 5/18/2020		<input type="radio"/> At-will-employee <input checked="" type="radio"/> Per contract	If temporary, anticipated termination date:
Position is funded for the following number of months/weeks: <input checked="" type="radio"/> 9 months <input type="radio"/> 10 1/2 months <input type="radio"/> 12 months <input type="radio"/> Other (specify)			
Explanation of Action: Re-classification from TFT to regular FT. Start date of 5/18/2020 is to prevent lapse in benefits			
Part III: Position/Budget Authorization			
Recommended by Supervisor/Department Head Kevin Dees		Approved by Dean _____ Date _____	
Approved by Division Chair Kevin Dees		Approved by Vice President _____ Date 1-9-20	
Approved by Cabinet Level Supervisor _____ Date _____		Reviewed by Human Resources _____ Date 1-21-20	
Budget Approval _____ Date 1/21/2020		Approved by President _____ Date 1-21-20	

RECEIVED

Vice President of Instruction

Date: 1/8/20 Initial: TC