

## **Personnel Action Form**

Human Resources

Banner ID #	Last Name Easley, Rebecca	First	Middle I	nitial	Telenhone
Address			City		State Zip
Part I: Check all that apply					
Classification: Administrative/Professional Staff Faculty Support Staff		✓ New Employee  ☐ Extension ☐ Salary Adjustment		(explain)	
Temporary		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:  Job Vacancy No.: (if applicable)					
CURRENT DIVISION/OMI.					
Job Title/Position:				Specialized Area:	
Budgeted Position? O Yes O No				Funded in which FY?	
Budget Number:				Position No. (NBAPOSN):	
Compensation:	Annual Sched Hourly Grade			Hourly Rate (Part-time only)  \$per hr xhrs/wk xwks =  \$per year	
Start Date:	Other (explain) End Date:	Step	At-will-employee	If temporary, anticipated termination date:	
			Per contract		
Position is funded for the following number of months/weeks:  © 9 months © 10½ months © 12 months © Other (specify)					
PROPOSED Division/Unit: Math, Readiness, and Justice				Job Vacancy No.: (if applicable) 1601 F 001	
Job Title/Position: Instructor of Mathematics				Specialized Area: Math	
Budgeted Position?  Yes No Name of Replaced Employee: Kimberly Benien				Funded in which FY? FY 16	
Budget Number: 1110.14305.6091.100				Position No. (NBAPOSN): MAT011	
Compensation: \$ 54,550	Annual Hourly Other (explain)	Sched   F     Grade   7		Hourly Rate: (Part-time only)  \$n/a per hr xn/a hrs/wk xn/a wks = \$n/a per year	
Start Date: 08/22/16		1 -	At-will-employee Per contract	If temporary, n/a	anticipated termination date:
Position is funded for the following number of months/weeks:  9 months 10 ½ months 12 months Other (specify)					
Explanation of Action:					
Part III: Position/Budget Authorization					
Recommended by Supervisor/Department Head  Date   Approved by Dean   Date   Approved by Dean   Date   Approved by Dean   Date   Date					
Approved by Division Chair Date Approved by Vice President Date					
Approved by Cabinet Level Supervisor  Approved by Cabinet Level Supervisor  Date Reviewed by Human Resources  Date					
Juff Jona 3-28-16					
Budget Approval		3/28/1	Approved by Pres	ety a n	releter I-28 To

Reg. 821

HR Requisition Number F 1603 0009

RECEREVISED May 29, 2014

Vice President of Instruction
Date: 3 24 [16 Initial: TC