



Banner ID # @ 00114998	Last Name Bahnsen, Rachel Y.	First	Middle Initial	Telephone
Address		City		State Zip

**Part I: Check all that apply**

Classification: <input checked="" type="radio"/> Administrative/Professional Staff <input type="radio"/> Faculty <input type="radio"/> Support Staff <input type="radio"/> Temporary <input checked="" type="radio"/> Regular	<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)  <b>Change from FT Temporary to Regular Status</b>
<input checked="" type="radio"/> Full-Time <input type="radio"/> Part-Time		

**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.

<b>CURRENT</b> Division/Unit: Administrative Services	Job Vacancy No.: (if applicable) 1702 A 004
Job Title/Position: Assistant Director of Payroll & Benefits	Specialized Area: Payroll and Benefits
Budgeted Position? <input checked="" type="radio"/> Yes <input type="radio"/> No	Funded in which FY? FY17
Budget Number: 1110.13021.6093.6002	Position No. (NBAPOSN): DIR01T
Compensation: \$ 72,067 <input checked="" type="radio"/> Annual <input type="radio"/> Hourly <input type="radio"/> Other (explain)	Sched CA _____ Grade 10 _____ Step 14 _____ Hourly Rate: (Part-time only) \$ N/A per hr x _____ hrs/wk x _____ wks = \$ _____ per year
Start Date: 02/27/17	End Date: N/A
<input type="checkbox"/> At-will-employee <input checked="" type="checkbox"/> Per contract	If temporary, anticipated termination date: 05/31/17

Position is funded for the following number of months/weeks:  
 9 months  10 1/2 months  12 months  Other (specify)

<b>PROPOSED</b> Division/Unit: Administrative Services	Job Vacancy No.: (if applicable) 1704 A 005
Job Title/Position: Director of Payroll and Benefits	Specialized Area: Payroll and Benefits
Budgeted Position? <input checked="" type="radio"/> Yes <input type="radio"/> No	Name of Replaced Employee: Conrad Kieler
Budget Number: 1110.13021.6093.6002	Funded in which FY? FY17
Budget Number: 1110.13021.6093.6002	Position No. (NBAPOSN): DIR001
Compensation: \$ 72,067 <input checked="" type="radio"/> Annual <input type="radio"/> Hourly <input type="radio"/> Other (explain)	Sched CA _____ Grade 10 _____ Step 14 _____ Hourly Rate: (Part-time only) \$ N/A per hr x _____ hrs/wk x _____ wks = \$ _____ per year
Start Date: 04/19/17	End Date: N/A
<input type="checkbox"/> At-will-employee <input checked="" type="checkbox"/> Per contract	If temporary, anticipated termination date: N/A

Position is funded for the following number of months/weeks:  
 9 months  10 1/2 months  12 months  Other (specify)

Explanation of Action:

**Part III: Position/Budget Authorization**

Recommended by Supervisor/Department Head <i>[Signature]</i> Date: 4-18-17	Approved by Dean <i>[Signature]</i> Date: 4-18-17
Approved by Division Chair <i>[Signature]</i> Date: 4/19/17	Approved by Vice President <i>[Signature]</i> Date: 4-19-17
Approved by Cabinet Level Supervisor <i>[Signature]</i> Date: 4/19/17	Reviewed by Human Resources <i>[Signature]</i> Date: 4-19-17
Budget Approval <i>[Signature]</i> Date: 4/19/17	Approved by President <i>[Signature]</i> Date: 4-20-17

*[Handwritten mark]*