

Personnel Action Form

Human Resources

| Banner ID # | Last Name F Korenek, Patricia | irst | | Middle Ini | tial | Telenhone | |
|---|--|--|---------|-----------------|---|----------------------|--|
| Address | 1 | | (| City | | State Zip | |
| 1 1 | <i>f</i> | | | | | | |
| Part I: Check all that apply | | | | | | | |
| Classification: Administrative/Professional S Faculty Support Staff Temporary Regular Part-T | Staff Extension Stalary A ime Separati | New Employee Extension Salary Adjustment Separation (date:) | | 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. | | | | | | | |
| 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: Allied Health / Vocational Instruction | | | | | Job Vacancy No.: (if applicable) n/a | | |
| Job Title/Position: Instructor of Associate Degree Nursing | | | | | Specialized Area: Associate Degree Nursing | | |
| Budgeted Position? | | | | | Funded in which FY? FY23 | | |
| Budget Number: 1110-14181-6091-102 | | | | | Position No. (NBAPOSN): ADNO06 | | |
| Compensation: | Annual Sched FAC | | | | Hourly Rate: (Part-time only) | | |
| \$ 86,734 | Other (explain) | Other (explain) Step 38 | | | $\frac{n/a}{per hr x} \frac{n/a}{n/a} hrs/wk x \frac{n/a}{wks} =$ | | |
| Start Date: 09/01/22 | End Date: n/a | in the second se | | | If temporary, anticipated termination date: | | |
| Position is funded for the following number of months/weeks: 9 months 10 ½ months 12 months Other (specify) | | | | | | | |
| PROPOSED Division/Unit: Allied Health / Vocational Instruction | | | | | Job Vacancy No.: (if applicable) n/a | | |
| Job Title/Position: Instructor of Associate Degree Nursing | | | | | Specialized Area: Associate Degree Nursing | | |
| Budgeted Position? | | | | | Funded in which FY? FY24 | | |
| Budget Number: 1110-14181-6091-102 Position No. (NBAPOSN): ADN006 | | | | | | | |
| Compensation: | Annual Hourly | Sched FAC Grade 1 | | | Hourly Rate: (Part-time only) \$ _n/a _ per hr x _n/a _ hrs/wk x _n/a _ wks = | | |
| \$ 89,402 | Other (explain) | Step 4 | | | | year | |
| Start Date: 09/01/23 At-will-employee Per contract | | | | | If temporary, anticipated termination date: | | |
| Position is funded for the following number of months/weeks: 9 months 10 ½ months Other (specify) | | | | | | | |
| Explanation of Action: Adjustment for longevity as agreed upon during the January 2015 BOT meeting. | | | | | | | |
| Part III: Position/Budget Authorization | | | | | | | |
| Recommended by Supervisor/Department Head Date Sandra Davis Digitally signed by Sandra Davis Date: 2023.09.20 13:44:15 -05'00' | | | | | | | |
| Approved by Division Chair Date Approved by Vice President Date | | | | | | | |
| Carol J. Derkowski, RDH, MAIE Date: 2023.09.13 15:26:58 -05'00' Leigh Ann Collins Date: 2023.09.07 17:13:15 -05'00' Digitally signed by Leigh Ann Collins Date: 2023.09.07 17:13:15 -05'00' | | | | | | | |
| Approved by Cabinet Level Supervisor Date Revised by Human Resources Date Revised by Human Resources Date Approved by President Date Date Part C. Melud Part C. Melud Revised May 29, 2014 | | | | | | | |
| Budget Approval | <i>\(\gamma\)</i> | 7/25/20 | e Appro | ved by Preside | ent o | Date (23) | |
| Reg. 821 HR Requisition | 1 Number 2309 00 | 56 | 2 [| rever Ce | ·III | Revised May 29, 2014 | |