

Personnel Action Form Human Resources

| Banner ID # @ – | er ID# Last Name Ali, Ranya | | First | | Middle Initial | | tial | Telephone | |
|--|--------------------------------|------------------|-------|---|--|----------------------------|--|------------------|----------------|
| Address | | | | (| City | | State Zip | | |
| Part I: Check all that apply | | | | | | | | | |
| Classification: V New Employee | | | | | | | | | |
| Administrative/Professional | ☐ Extension | | | | (e | Apmili) | | | |
| Faculty Support Staff | Salary Adjustment | | | | | | | | |
| 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) | | | | | | | | | able) |
| DIVISION CINC | | | | | | | , , , | | |
| Job Title/Position: | | | | | | | Specialized Area: | | |
| Budgeted Position? Yes No | | | | | | | Funded in which FY? | | |
| Budget Number: | | | | | | Position No. (NBAPOSN): | | | |
| Compensation: | Annual | | Sched | | | | Hourly Rate: (Part-time only) | | |
| \$ | O Hourly | Grade | | | | \$ per hr x hrs/wk x wks = | | | |
| | Other (exp | Step | | | | \$per year | | | |
| Start Date: | | | | | At-will-employee If temporary Per contract | | If temporary, a | anticipated ter | mination date: |
| Position is funded for the following number of months/weeks: 9 months 10½ months 0 12 months Other (specify) | | | | | | | | | |
| PROPOSED Division/Unit: Instruction/Math and Physical Sciences | | | | | | | Job Vacancy No.: (if applicable) 2307 F 032 | | |
| Job Title/Position: Instructor of Mathematics | | | | | | , | Specialized Area: Mathematics | | |
| Budgeted Position? | | | | | | | Funded in which FY? FY23 | | |
| Budget Number: 1210-14305-6091-100 Position No. (NBAPOSN): MAT011 | | | | | | | | | MAT011 |
| Compensation: | Annual | Annual Sched FAC | | | | Hourly Rate: | | (Part-time only) | |
| \$ 54,050 | Hourly | Grade 5 | | | | | \$ <u>n/a</u> per hr x <u>n/a</u> hrs/wk x <u>n/a</u> wks = \$ n/a per year | | |
| Start Data: | Other (exp | | | | At-will-employee | | If temporary, anticipated termination date: | | |
| 08/21/23 | | | | | | n/a | | | |
| Position is funded for the following number of months/weeks: ② 9 months ② 10 ½ months ② 12 months ② Other (specify) | | | | | | | | | |
| Explanation of Action: | | | | | | | | | |
| Part III: Position/Budget Authorization | | | | | | | | | |
| Recommended by Supervisor/Department Head Date Approved by Dean Date | | | | | | | | | |
| Approved by Division Chair | | | Da | | Approv | ed by Vice Pr | esident | | Date |
| Jennifer Mauch Distance American Branch County Annior Codings, email-re-authoring weighted to any - Rosel Service American County Annior Codings, email-re-authoring weighted to any - Rosel Service Codings, email-re-authoring weighted to any - Rosel Service Codings (Email Codings). | | | | | Leigh Ann Collins Digitally signed by Leigh Ann Collins Date: 2023.08.11 18:47:51 -05'00' | | | | |
| Approved by Cabinet Level Supervisor Date Reviewed by Human Resources / Dayle | | | | | | | | | |
| | | | | | Sin | hill | Dehn | sen | 08/15/23 |
| Budget Approval | | - 1 | Da Da | | Approv | ed by Preside | | | Date |
| 8. 18 Secret 08/15/2023 Boty a. maly 8-16-23 | | | | | | | | | |
| Reg. 821 HR Requisition Number 2308 0047 Revised May 29, 2014 | | | | | | | | | |