



Banner ID # @	Last Name Kizzee, Leisha W	First	Middle Initial	Telephone
Address		City		State Zip

Part I: Check all that apply

Classification: <input type="radio"/> Administrative/Professional Staff <input type="radio"/> Faculty <input type="radio"/> Support Staff <input type="radio"/> Temporary <input checked="" type="radio"/> Regular	<input checked="" type="radio"/> New Employee <input type="radio"/> Extension <input type="radio"/> Salary Adjustment <input type="radio"/> Separation (date: _____)	<input type="checkbox"/> Other (explain)
<input 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.

CURRENT Division/Unit:	Job Vacancy No.: (if applicable)
Job Title/Position:	Specialized Area:
Budgeted Position? <input type="radio"/> Yes <input type="radio"/> No	Funded in which FY?
Budget Number:	Position No. (NBAPOSN):
Compensation: \$ <input type="radio"/> Annual <input type="radio"/> Hourly <input type="radio"/> Other (explain)	Sched _____ Grade _____ Step _____ Hourly Rate: (Part-time only) \$ _____ per hr x _____ hrs/wk x _____ wks = \$ _____ per year
Start Date:	End Date: <input type="radio"/> At-will-employee <input type="radio"/> Per contract If temporary, anticipated termination date:
Position is funded for the following number of months/weeks: <input type="radio"/> 9 months <input type="radio"/> 10 1/2 months <input type="radio"/> 12 months <input type="radio"/> Other (specify)	

PROPOSED Division/Unit: Allied Health	Job Vacancy No.: (if applicable) 2407 F 027
Job Title/Position: Instructor of Associate Degree Nursing	Specialized Area: Associate Degree Nursing
Budgeted Position? <input checked="" type="radio"/> Yes <input type="radio"/> No	Name of Replaced Employee: Suzette Isokpunwu Funded in which FY? FY26
Budget Number: 1610-14181-6091-102	Position No. (NBAPOSN): ADN011
Compensation: \$ 64,550 <input checked="" type="radio"/> Annual <input type="radio"/> Hourly <input type="radio"/> Other (explain)	Sched <u>FAC</u> <input checked="" type="checkbox"/> Grade <u>1</u> Step <u>30</u> Hourly Rate: (Part-time only) \$ <u>n/a</u> per hr x <u>n/a</u> hrs/wk x <u>n/a</u> wks = \$ <u>n/a</u> per year
Start Date: 10/22/25	<input checked="" 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: <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:

Part III: Position/Budget Authorization

Recommended by Supervisor/Department Head Sandra Davis Digitally signed by Sandra Davis Date: 2025.09.18 14:22:41 -05'00'	Date	Approved by Dean	Date
Approved by Division Chair Carol J. Derkowski, RDH, MAIE Digitally signed by Carol J. Derkowski, RDH, MAIE Date: 2025.09.18 14:31:10 -05'00'	Date	Approved by Vice President Leigh Ann Collins Digitally signed by Leigh Ann Collins Date: 2025.09.19 11:24:54 -05'00'	Date
Approved by Cabinet Level Supervisor	Date	Reviewed by Human Resources	Date
Budget Approval Cynthia Ward	Date 9.26.25	Approved by President Manderley	Date 09/20/25