



Banner ID # @	Last Name Wilkinson, Michael R.	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 checked="" type="radio"/> Temporary <input 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) Change in title/assignment.
<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.

CURRENT Division/Unit: Administration	Job Vacancy No.: (if applicable) 2507 A 024
Job Title/Position: Chief of Staff	Specialized Area: President's Office
Budgeted Position? <input checked="" type="radio"/> Yes <input type="radio"/> No	Funded in which FY? 26
Budget Number: 1110-110-6093-6001	Position No. (NBAPOSN): CHS001
Compensation: \$ 114,099 <input checked="" type="radio"/> Annual <input type="radio"/> Hourly <input type="radio"/> Other (explain)	Hourly Rate: (Part-time only) \$ n/a per hr x n/a hrs/wk x n/a wks = \$ n/a per year
Start Date: 11/10/2025 End Date: n/a	<input type="radio"/> At-will-employee <input checked="" type="radio"/> Per contract If temporary, anticipated termination date:

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

PROPOSED Division/Unit: Administration	Job Vacancy No.: (if applicable) 2604 A 013
Job Title/Position: Executive Director of Special Projects	Specialized Area: President's Office
Budgeted Position? <input checked="" type="radio"/> Yes <input type="radio"/> No	Name of Replaced Employee: n/a
Budget Number: 1510-120-6093-400	Position No. (NBAPOSN): DIR39T
Compensation: \$ 114,099 <input checked="" type="radio"/> Annual <input type="radio"/> Hourly <input type="radio"/> Other (explain)	Hourly Rate: (Part-time only) \$ n/a per hr x n/a hrs/wk x n/a wks = \$ n/a per year
Start Date: 05/01/2026 End Date: n/a	<input type="radio"/> At-will-employee <input checked="" type="radio"/> Per contract If temporary, anticipated termination date: 08/31/2027

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	Date	Approved by Dean	Date
Approved by Division Chair	Date	Approved by Vice President	Date
Approved by Cabinet Level Supervisor Amanda A. Allen	Date	Reviewed by Human Resources	Date
Budget Approval	Date	Approved by President	Date