Wharton County Junior College

Personnel Action Form

Human Resources

Banner ID #	Last Name	First	Middle Initial	Telephone
@	Wright, Terri D.			
Address		City	State	Zip

Part I: Check *all* that apply

Classification			
○ Administrative/Professional Staff ◉ Faculty ○ Support Staff		☑ New Employee ☐ Extension ☐ Salary Adjustment ☐ Separation (date:_____)	☐ Other (explain)
○ Temporary ◉ Regular	◉ Full-Time ○ 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? ○ Yes ○ No				Funded in which FY?
Budget Number:				Position No. (NBAPOSN):
Compensation: $	○ Annual ○ Hourly ○ Other (explain)	Sched _____ Grade _____ Step _____		Hourly Rate: (Part-time only) $ _____ per hr x _____ hrs/wk x _____ wks = $ _____ per year
Start Date:	End Date:	○ 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 ○ 12 months ○ Other (specify)

PROPOSED Division/Unit: Dean of Students				Job Vacancy No.: (if applicable) 2605 F 030
Job Title/Position: Counselor				Specialized Area: Counseling and Disability Services
Budgeted Position? ◉ Yes ○ No	Name of Replaced Employee: Shannon Hofer			Funded in which FY? FY26
Budget Number: 1610-14101-6093-503				Position No. (NBAPOSN): COU004

Compensation:
$ 70,737
	◉ Annual
	○ Hourly
	○ Other (explain)
		Sched FAC
		Grade 1
		Step 7
				Hourly Rate: (Part-time only)
				$ n/a per hr x n/a hrs/wk x n/a wks =
				$ n/a per year

Start Date: 08/24/26		○ At-will-employee ◉ Per contract		If temporary, anticipated termination date: n/a

Position is funded for the following number of months/weeks:
○ 9 months ○ 10 ½ months ◉ 12 months ○ Other (specify)

Explanation of Action:

Part III: Position/Budget Authorization

Recommended by Supervisor/Department Head	Date	Approved by Dean	Date
Amber Barbee Digitally signed by Amber Barbee Date: 2026.07.23 08:41:09 -05'00'		Lindsey McPherson Digitally signed by Lindsey McPherson Date: 2026.07.23 12:22:42 -05'00'	
Approved by Division Chair	Date	Approved by Vice President	Date
		Lindsey McPherson Digitally signed by Lindsey McPherson Date: 2026.07.23 12:23:05 -05'00'	
Approved by Cabinet Level Supervisor	Date	Reviewed by Human Resources	Date
		Rachel Johnson	7/29/26
Budget Approval	Date	Approved by President	Date
Terri Wright	7-27-26		07/31/26

Reg. 821 HR Requisition Number F 2607 0037

Revised May 29, 2014