



Wharton County Junior College

Personnel Action Form Human Resources

Banner ID # @	Last Name Williams, Timinka	First	Middle Initial	Telephone
City			State	Zip

Part I: Check all that apply

Classification: ☐ Administrative/Professional Staff ☐ Faculty ☐ Support Staff ☐ Temporary ☐ Regular	☒ New Employee ☐ Extension ☐ Salary Adjustment ☐ Separation (date: _____)	☐ Other (explain)
☐ 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 1/2 months ☐ 12 months ☐ Other (specify)	

PROPOSED Division/Unit: Vocational Science / Vocation Instruction	Job Vacancy No.: (if applicable) 2605 F 029
Job Title/Position: Instructor of Cosmetology	Specialized Area: Cosmetology
Budgeted Position? ☒ Yes ☐ No	Name of Replaced Employee: Sandra Kolafa Funded in which FY? FY27
Budget Number: 1210-14022-6091-102	Position No. (NBAPOSN): COS02T
Compensation: \$ 60,570 ☒ Annual ☐ Hourly ☐ Other (explain)	Sched T2 Grade AAB Step n/a Hourly Rate: (Part-time only) \$ n/a per hr x n/a hrs/wk x n/a wks = \$ n/a per year
Start Date: 08/31/26	☒ At-will-employee ☐ Per contract If temporary, anticipated termination date: 07/16/27 kn
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 Bethany A Steffek Digitally signed by Bethany A Steffek Date: 2026.08.26 09:21:57 -05'00'	Approved by Dean Kim Ashburn Digitally signed by Kim Ashburn Date: 2026.08.26 10:58:29 -05'00'
Approved by Division Chair Robert Sanchez Digitally signed by Robert Sanchez Date: 2026.08.26 09:48:19 -05'00'	Approved by Vice President Pam Millsap Digitally signed by Pam Millsap Date: 2026.08.26 15:56:56 -05'00'
Approved by Cabinet Level Supervisor	Reviewed by Human Resources <i>[Signature]</i> Date: 09-01-26
Budget Approval <i>[Signature]</i> Date: 08/31/26	Approved by President <i>[Signature]</i> Date: 09/01/26