WENATCHEE VALLEY COLLEGE

**Personnel Action Form – Combo Code/Budget Change**

**INSTRUCTIONS Type of employee**:

• Sections 1, 2 and 3 completed by originator, signed and forwarded to others listed.  Classified,  Exempt,  FTF,  PTF,  Hourly,

• Section 4 signed by appropriate personnel and forwarded to HR.  Other

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| **SECTION 1 – TYPE OF ACTION** |
| Combo Code/Budget Change  Other related to Combo Codes/Budgets  Explanation of action, if needed, or other comments:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_    \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| **SECTION 2 – EMPLOYEE** | | |
| Last Name | First Name | Empl I.D. |
| Job Title | Department | Supervisor |

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| **SECTION 3 – NEW STATUS** | | | | | | | |
| **Effective Date:** | | | | | | | |
| Combo Code | Fund (149\*) | Class Field (011,014) | Department (1T020) | Project # | Activity I.D. | + | % of Total |
| Combo Code | Fund (149\*) | Class Field (011,014) | Department (1T020) | Project # | Activity I.D. | + | % of Total |
| Combo Code | Fund (149\*) | Class Field (011,014) | Department (1T020) | Project # | Activity I.D. | + | % of Total |
| Combo Code | Fund (149\*) | Class Field (011,014) | Department (1T020) | Project # | Activity I.D. | + | % of Total |
| Combo Code | Fund (149\*) | Class Field (011,014) | Department (1T020) | Project # | Activity I.D. | + | % of Total |
| Combo Code | Fund (149\*) | Class Field (011,014) | Department (1T020) | Project # | Activity I.D. | + | % of Total |
| Combo Code | Fund (149\*) | Class Field (011,014) | Department (1T020) | Project # | Activity I.D. | + | % of Total |
| Combo Code | Fund (149\*) | Class Field (011,014) | Department (1T020) | Project # | Activity I.D. | + | % of Total |
| Combo Code | Fund (149\*) | Class Field (011,014) | Department (1T020) | Project # | Activity I.D. | + | % of Total |
| Combo Code | Fund (149\*) | Class Field (011,014) | Department (1T020) | Project # | Activity I.D. | + | % of Total |
| Combo Code | Fund (149\*) | Class Field (011,014) | Department (1T020) | Project # | Activity I.D. | + | % of Total |

*\*Other fund codes are 060, 147, 057, 145, 001,08A, 24J, 146, 148.*

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| **SECTION 4 – SIGNATURES** | **APPROVALS** | |
| Administrator/Supervisor #1 Date | Vice President (if needed) #1 Date | WVC Budget Manager Date |
| Administrator/Supervisor #2 Date | Vice President (if needed) #2 Date | WVC Grant Budget Check Date |
| Administrator/Supervisor #3 Date | Vice President (if needed) #3 Date | Human Resources/AA Officer Date |

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| **SECTION 5 – HR** |  |
|  Updated in ctcLink \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |

**Distribution:** HR combo code change file