

REQUEST FOR TEACHING ASSIGNMENT OVERLOAD

DEPARTMENT _____ DATE _____

REQUEST FOR: _____ FULL TIME ADJUNCT

SEMESTER: FA WI SU YEAR: 20 _____

COURSE: _____

LIST THE COURSES THIS FACULTY MEMBER IS ALREADY SCHEDULED TO TEACH:

LAST OVERLOAD ASSIGNMENT _____ OR N/A
(Semester)

IS THIS PERSON SCHEDULED TO TEACH IN ANOTHER DEPARTMENT? YES NO

IF YES, WHICH DEPARTMENT? _____

REASON FOR REQUEST:

Department Chairperson

Date

This section to be completed by Academic Affairs and Human Resources

APPROVED DENIED

REASON FOR APPROVAL OR DENIAL:

Academic Dean

Date

Director of Human Resources

Date