



Academic Affairs

Tenure Track and Full Time Faculty Request for Assigned and Reimbursed Time
Full process must be complete no later than 10 days after Spring Census

Section I. Instructor Information

Date:		Term and Year:	
Instructor Name:			
Department:			
Number of Units Requested:		Assigned Time Code:	

Section II: Description of Duties

Provide a concise description of proposed and reimbursed time responsibilities:

Section III: Funding

Funding Source: <i>(Department, University, External, etc.)</i>	
Funding Source Account Number: <i>(Fund, Account, Program, Class)</i>	
Percentage of Funding:	

Secondary Funding Source: <i>(Department, University, External, etc.)</i>	
Secondary Funding Source Account Number: <i>(Fund, Account, Program, Class)</i>	
Percentage of Funding:	

Section IV: Approvals

Faculty Name:			
Faculty Signature:		Date:	

Does this request require the hiring of a replacement instructor?			
Dept. Chair Name:			
Dept. Chair Signature:		Date:	

College Dean Name:			
College Dean Signature:		Date:	