

# Application for Faculty Instructional Reassignment

1. **Term in which assignment would begin**

.....

2. **Faculty Name**

.....

3. **G-number**

.....

4. **Division**

*Mark only one oval.*

- Athletics, Library & Learning Center
- Business, Design & Workforce
- Humanities & Social Sciences
- Science & Technology
- Student Services

5. **Department**

.....

6. **Application Date**

*Example: December 15, 2012*

## Assignment Overview

7. **Type of request**

*Check all that apply.*

- new reassigned time
- renewal of existing reassigned time
- augmentation to existing reassigned time
- a revision to a previously submitted application

**8. Type of assignment**

Identify the type of assignment (faculty leadership, coordinator, research, etc.) - one line description

.....

## **Amount of Instructional Reassignment**

---

Please report the amount of FTE you are requesting for each term and calculate the total annual FTE. Calculations:

0.2 FTE (3 units) = 7.5 hrs/week or approximately 120 hrs/semester

Each additional unit (0.067 FTE) represents an additional 2.5 hrs/week

**9. Fall (FTE)**

.....

**10. Spring (FTE)**

.....

**11. Total Annual FTE**

.....

**12. Duration of Reassignment**

How many semesters of reassigned time are being requested? When is the end date?

.....

**13. Commitment**

Upon completion of the reassignment term,  
*Check all that apply.*

- The work is complete and no further investments is required
- The work will require an on-going commitment of reassigned time or long-term staffing

**14. How will the part-time faculty replacement costs be funded?**

*Mark only one oval.*

- Fund 1 PT faculty allocation
- Grant funding
- Categorical funding
- Other: .....

## **Justification**

## External requirements (if relevant)

---

Complete this section if the reassigned time is mandated by an external agency or organization

**15. Name of external agency/organization**

.....

**16. Amount of mandated reassigned time**

If this differs from the amount being requested, please explain here.

.....

## Required duties to be performed

---

In a separate document (to be attached to this form):

- (a) identify the duties to be performed and explain why they require reassigned time;
- (b) identify how this request aligns with the College's strategic plans and initiatives;
- (c) provide evidence that the quantity of reassigned time is justified by the workload. This might be accomplished by providing a schedule of work to be performed during a typical week. (1 unit = 2.5 hrs/week)

**17. Nature, number and frequency of meetings**

complete if applicable

.....

**18. Number of faculty directly served by this position annually**

complete if applicable

.....

**19. Number of students directly served by this position annually**

complete if applicable

.....

**20. Accountability/Reporting**

Describe how the activities performed under this assignment will be recorded or reported.

.....