



## Request for New Reassignment Proposal

Instructions: Complete the following form. Ask your Dean to review and sign. Then your Dean will submit it to the Office of Instruction. For information about the timeline and process for determining selection of faculty coordinators see [Reassigned Time Process webpage](#).

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1. Term in which assignment would begin (semester, year):

2. Application Date (mm/dd/yyyy):

3. Author(s):

### Overview

4. Position or Project Name

Identify a “one line” description of the type of assignment (faculty leadership, coordinator, research, etc.):

5. Amount of Reassignment & Duration

- a. 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.

Fall (FTE):          Spring (FTE):          Total Annual (FTE):

- b. How many semesters of reassigned time are being requested? Note, if the position is needed after the end of the term, a [Renewal Application](#) must be filled out.

### Justification and Assessment

6. Outcomes & Activities

- a. Please list the core responsibilities and/or outcomes to be performed and calculate the approximate number of hours per week required to perform each (e.g., recruiting = 1hr/week). (1 unit = 2.5 hours per week)

- b. Identify how the activities align with the college's [Educational Master Plan](#) and/or initiatives (for example, Guided Pathways, CTE, etc). (Please limit response to 250 words).

7. The following responsibilities are included as part of faculty workload and can be found here. Please explain how the duties for which you are requesting reassigned time are different from those enumerated in [Appendix D1](#).

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*Administrative Use Only*

Dean's Review:

- ☐ Fully support request
- ☐ Support with reservation
- ☐ Do not support (explanation required)

Explanation:

Dean Signature: