

Undergraduate Faculty Adjunct Request Form

Department: _____ **Requesting to be hired for Semester:** _____

Total number of 3 and 4 cr. courses taught by the department this semester _____

Total number of 3 and 4 cr. courses taught by Adjuncts this semester _____

Please fill in this form each semester when requesting Undergraduate Faculty adjunct positions for your department. Please send a copy of the completed form to your appropriate Dean.

Adjunct Faculty Name	Replacement for...	CRN	Course Prefix, Number & Section	Course Name	Faculty Workload credits*

* Please put in the number of credits the adjunct faculty will be getting to teach the particular course. Most of the time, this will be 3 credits, but labs and practicums may vary from this. (consult the MSCA contract for information about workload related to Practicums, Internships, Field Work or Supervision)

Submitted by: _____

Date: _____

Approved by: _____

Date: _____