Date

Name

Address

Dear Dean of Division Name:

I am requesting an additional job (.13 FTE, 25%) forName, who is a Faculty in the Department/Program. He/She/They will be teaching Name of Course, Course/Section for the \_\_\_\_ semester. This offer is contingent upon adequate enrollment for this/these course section(s).

We will pay her/him/them $\_\_\_ for this additional job starting date and ending date.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name, Chair/Director Date

Unit

1. What is the current FTE/Percentage of this employee? FTE:\_\_\_\_\_ Percentage:\_\_\_\_\_

Please include all active appointments for the term in which the additional job is being requested

2. If primary appointment is Teaching Professor rank, does the contract permit additional jobs?

Yes:\_\_\_\_\_ No:\_\_\_\_\_ N/A:\_\_\_\_\_

2. a. If no, have you spoken to the appointing Divisional Dean about this appointment?

Yes:\_\_\_\_\_ No:\_\_\_\_\_ N/A:\_\_\_\_\_

Concurred:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name, Chair/Director Date

Unit

Concurred:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name, Chair/Director Date

Institute

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name Date

Vice Chancellor for Research and Innovation

NOTES:

1. Employee last taught for the College of Arts and Sciences:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Please include both term and department name

2. Current percentage of Research Faculty (13XX job code) appointment:\_\_\_\_\_%

I have reviewed the policy related to overload limits for the College of Arts and Sciences and certify that this additional appointment does not exceed the limit on overload teaching related to my principal appointment. All of the courses I have agreed to teach this academic year are listed on the following page.

I accept this offer as described above.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Faculty Member Name Date

1. If your primary appointment Teaching Professor rank, please verify that your contract allows you to have an additional job. Yes:\_\_\_\_\_ No:\_\_\_\_\_ N/A:\_\_\_\_\_

2. If your primary appointment does not allow for an additional job, please confirm that you have spoken to your chair/director about this restriction. Yes:\_\_\_\_\_ No:\_\_\_\_\_ N/A:\_\_\_\_\_

Concurred:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name, Dean of Division Date

College of Arts and Sciences

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name, Dean of Division Date

College of Arts and Sciences

|  |
| --- |
| **For Department/Program Use Only:** |
|  |  |  |  |  |   |
| **Is a BGC needed?** |   | **If yes, request for BGC sent to hr-bgc@colorado.edu:** |   |
|  |  |  |  |  |   |
|  **BGC completion date:** |   |  |  |  |   |
|  |  |   |   |   |   |
| **New CU hire?** |   | **If no, Employee ID #:** |   | **Position #:** |   |
|  |  |   |   |   |   |
| **Funding Distribution Speedtype:** |   | (if ST blank, dept salary ST will be charged) |
|  |  |  |  |  |   |
| **Funding Source L&R?** |  |  |  |  |   |
|  |  |  |  |  |   |
| **If not L&R, explain source of funding:** |   |
|  |  |   |   |   |   |

Reviewed 19 July 2024