

CALENDAR YEAR FACULTY WORK ASSIGNMENT

COLLEGE OF EDUCATION & HEALTH PROFESSIONS

12-month faculty

Name: _____ Department: _____ Calendar Year: _____

Title: _____ % Appointment: _____

TEACHING/ADVISING

Courses that are part of teaching %:						Teaching/ Advising %
Spring Courses	Cr hrs to faculty	Summer Courses	Cr hrs to faculty	Fall Courses	Cr hrs to faculty	
						Teaching %

Proposed Overload Courses (for extra pay) policy 407.0

Semester	Course	Cr hrs

Calculated % teaching-->

Advising %

Additional teaching activities or reasons why teaching % is non-standard (e.g., grant buyouts, etc.). NTT faculty, list scholarly plans, if any.

Anticipated advisee numbers:	Anticipated student committee numbers:		
Undergraduate #	Honors:	Member	Chair
Masters #	Masters:	Member	Chair
Doctoral #	Doctoral advisory:	Member	Chair
	Dissertation/Capstone:	Member	Chair

RESEARCH

Additional Plans:

Refereed article submissions

Refereed article publications

Book manuscript submissions

International/national conference

submissions/presentations

Grants submitted/administered

Non-refereed articles

Book chapters

Regional/state presentations

Research %

SERVICE

of Committees:

Departmental	Member	Chair
College	Member	Chair
University	Member	Chair
Professional (state/regional)	Member	Chair
Professional (national)	Member	Chair
Professional (international)	Member	Chair

Check if applies:

Program Coordinator

Undergraduate Coordinator

Internship/Clinical Coordinator

Graduate Coordinator

Assistant Director/Dept Head

Director/Dept Head

Additional Plans (list out committee names or additional roles you may serve):

Service %

TOTAL YEARLY WORKLOAD ASSIGNMENT (must equal % appointment):

Faculty Signature _____ Date _____

Dept. Head Approval _____ Date _____

Dean's Approval _____ Date _____