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| --- | --- | --- | --- |
| NAME: | Employee ID #: | | DEPT: |
| DEGREE (Master’s or equivalent, required): | GPA: | | 1-YEAR TEACHING EXPERIENCE: |
| TODAY’S DATE:  QUARTER:       (i.e., Fall 11) | | | ANNUAL SALARY: $  MONTHLY SALARY: $      (use 1/9 rate) |
| COURSE NUMBER: | | | PERCENT OF APPOINTMENT:      % |
| TITLE CODE (1506 for GSHIP; 1507 for Non-GSHIP: | | | |
| Graduate Student Health Insurance Premium (per quarter): $ | | Partial Fee Remission (per quarter): $ | |
| Funding Approval: Dean’s Allocation  Department  Other | | | |

1. **Complete only for the teaching of an Upper Division Course** (#’s 100 and up); include the following documents:

**APSU Bio/Bib,** **signed**  **CV**  **Graduate Transcript**  **Student Evaluations**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| JUSTIFICATION for request to teach an Upper Division course (must include a statement that the student will be “Instructor in Charge” of the course; individual’s qualifications; and name of faculty who will monitor course): | | | | | |
|  | | | | | |
| DEPT. VOTE | DATE: | POSITIVE: | NEGATIVE: | ABSTAIN: | UNAVAILABLE: |
| ADVISORY VOTE: | DATE: | POSITIVE: | NEGATIVE: | ABSTAIN: | UNAVAILABLE: |

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| Department Chair’s Signature | Date |  | Dean’s Signature | Date |

|  |  |
| --- | --- |
|  |  |
| Committee on Courses Approval | Date |

1. **Complete for the teaching of a Lower Division Course;** include the following documents:

**APSU Bio/Bib,** **signed**  **CV**  **Student Evaluations**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| JUSTIFICATION for request to teach a Lower Division course (must state that the student will be “Instructor in Charge” of the course): | | | | | |
|  | | | | | |
| DEPT. VOTE | DATE: | POSITIVE: | NEGATIVE: | ABSTAIN: | UNAVAILABLE: |
| ADVISORY VOTE: | DATE: | POSITIVE: | NEGATIVE: | ABSTAIN: | UNAVAILABLE: |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Department Chair’s Signature | Date |  | Dean’s Signature | Date |