|  |  |  |
| --- | --- | --- |
| 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:       |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 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 |