



FACULTY ACTION FORM

Request for Revisions and Updates to Faculty Contracts/Appointments

SUBMISSION DATE:

Use this form to request revisions and/or to update details of an existing or future contract/appointment for active, with benefits faculty. All requests are subject to approval. Attach supporting documentation as needed (Letter of resignation, course assignment sheet, etc.)

FACULTY INFO <small>(Current)</small>	Name (Last, First):						
	PLU ID:			Department:			
	Pos #			College of:			
	Title:			Faculty Classification:			
APPOINTMENT ACTION	EFFECTIVE DATE for Revised Faculty Contract/Appointment:						
	<i>Requested Action (mark all that apply):</i>						
	<input type="checkbox"/> Revision to Appointment (FTE/Salary) <small>reduced load request, course changes</small>		<input type="checkbox"/> Update Job Status <small>(Termination, Resignation, Retirement)</small>			<input type="checkbox"/> Secondary Appointment	
	<i>Mark all contract revisions that apply:</i>				<i>Mark all reasons that apply:</i>		
	<input type="checkbox"/> FTE	Current:	New:	<input type="checkbox"/> Course Replacement FTE for			
<input type="checkbox"/> Salary	Current:	New:	<input type="checkbox"/> Reclassification (promotion/degree update*)				
<input type="checkbox"/> Salary Distribution Change (enter details in "Funding" section)			<input type="checkbox"/> Retirement/Resignation (attach LOR if applicable)				
<input type="checkbox"/> Title Change:			<input type="checkbox"/> Request for Reduction in Load				
<input type="checkbox"/> New Position			<input type="checkbox"/> Other:				
<input type="checkbox"/> Other			<input type="checkbox"/> Notice of Leave Request* for:				
			<input type="checkbox"/> Stop Tenure Clock				
Details/Statement of Purpose/Justification for Request:							
FUNDING	%	FTE	FUND	ORG	ACCOUNT	PROGRAM	NOTES
CHAIR AND DEAN RECOMMENDATION	<i>By signing below, I confirm that the above accurately reflects the appointment action being requested.</i>						
	_____				_____		
	<i>School Dean/Department Chair/Program Director</i>				<i>Date</i>		
_____				_____			
<i>College Dean</i>				<i>Date</i>			
APPROVAL	<input type="checkbox"/> Approve		Comments:				
	<input type="checkbox"/> Deny						
_____		_____					
<i>Provost, Vice President for Academic Affairs</i>		<i>Date</i>					
PROV	Base Salary: \$		Annual Salary: \$		ECLS:		Reviewed by:
	Action: <input type="checkbox"/> Contract Revision AY _____ <input type="checkbox"/> MOU _____ <input type="checkbox"/> Letter/Memo _____						

*For FMLA, LOA, and degree verification requests, contact HR for steps and/or required documentation. Final approval of these requests are determined by HR, after all required paperwork has been received and reviewed.

IMPORTANT NOTE: Title and salary changes due to promotions/degree changes will not take effect until the following academic year.



Academic Year:
Name:
College of:
Department:

Course Assignment Sheet

TERM	SUB/COURSE#/SEC	TITLE	CREDITS	LOAD*	FTE*
TOTAL:					

- *Standard Course Load and FTE Assignment:
- 4-credit course = 1.00 course load = 0.167FTE
 - 3-credit course = 0.75 course load = 0.125FTE
 - 2-credit course = 0.50 course load = 0.083FTE
 - 1-credit course = 0.25 course load = 0.042FTE

If the course load and/or FTE assigned to any course listed above does not correspond to this standard, please explain below: