



**Authorization to Teach
For Current Full-Time, Non-Academic Employees**

Employee Name:

Current Position:

Course(s) Name:

Class(es) Meets:

<input type="checkbox"/> Monday	class starts:	<input type="text"/>	class ends:	<input type="text"/>
<input type="checkbox"/> Tuesday	class starts:	<input type="text"/>	class ends:	<input type="text"/>
<input type="checkbox"/> Wednesday	class starts:	<input type="text"/>	class ends:	<input type="text"/>
<input type="checkbox"/> Thursday	class starts:	<input type="text"/>	class ends:	<input type="text"/>
<input type="checkbox"/> Friday	class starts:	<input type="text"/>	class ends:	<input type="text"/>
<input type="checkbox"/> Distance Learning/Asynchronous				

Semester or Time Duration:

Credits:

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- I recognize that teaching preparation must be conducted outside of my regular work schedule.
 - I recognize that grading must be conducted outside of my regular work schedule.
 - Employees are permitted to teach a maximum of two courses per semester.

Employee Signature and Date

Division or Department Authority Signature and Date

Authority (VPAA, AVP) Signature and Date

For Administrative Use Only:

Average number of weekly hours expected to fulfill this commitment:

Original to be sent to the Human Resources Office; copies to supervisor and employee