# Part-Time Faculty Additional Assignment Authorization

**Academic Year**

**Last Name:** __________________________  **First Name:** __________________________

**Division:** __________________________ **Dept:** __________________________ **Employee CWID:** __________________________

<table>
<thead>
<tr>
<th>Assignment Title*</th>
<th>Pay Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>(Describe duties being performed on an additional page for each assignment)</em></td>
<td></td>
</tr>
</tbody>
</table>

**Index Code:** __________ or **Fund:** __________ **Org:** __________ **Acct:** 1430 **Prog:** __________

**Start:** __________ **End:** __________ **Hourly Rate:** $ __________ **NTE* Amt:** $ __________

*NTE = not to exceed*

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**Please Note:** Not withstanding Article 7.11 in the FA Agreement, additional pay for part-time faculty will create load if it is their primary assignment and will be calculated by column and step. Please keep this in mind when awarding additional pay to part-time faculty.

## Approvals

<table>
<thead>
<tr>
<th>Originator’s Name (Please Print)</th>
<th>Ext./Date</th>
<th>Faculty Member</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Division Dean</strong></td>
<td>Date</td>
<td><strong>Vice President</strong></td>
<td>Date</td>
</tr>
<tr>
<td><strong>Associate V.P. of Instruction</strong></td>
<td>Date</td>
<td><strong>Director, Budget &amp; Personnel</strong></td>
<td>Date</td>
</tr>
</tbody>
</table>

*All Additional Pay is presumed No Load unless initialed by the A. V.P. of Instruction. Load Initialed by: _____ AVPI

**COLA:** Yes No

**NOTES:** Submit this signed authorization form to Campus Personnel Office prior to start of assignment. Timesheets cannot be processed without an additional assignment authorization form. Monthly timesheets must be submitted. Submit timesheet to Campus Personnel Office (Administration Building Room 137) by the 13<sup>th</sup> calendar day of the month for inclusion in the month-end pay cycle.

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For Payroll Use Only

**Position #:** __________________________ **Entered by:** __________________________ **Date:** __________________________

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