

# TEMPORARY FACULTY APPOINTMENT FORM

<b>Department:</b>		<b>REVISION #</b> (specify original, enter # if a revision):	
<b>Dr.</b>			
<b>Ms.</b>			
<b>Mr.</b>	(Last)	(First)	(M.I.)
<b>Mailing Address:</b>		<b>Primary Phone:</b>	<b>Highest Degree Earned</b>
		<b>Other Phone:</b>	
<b>Recommendation</b>		<b>Year of Appt.:</b>	<b>Email:</b>
<b>Check One</b>	<b>Rank</b>	<b>Step</b>	<b>Type of Appointment</b>
			<input type="checkbox"/> New Faculty <input type="checkbox"/> Check if staff (needs APSCUF permission)
	Instructor		Temporary Faculty (Full or Part-time) with 60 prior workload hours min.
	Assistant		Full-time Temporary Faculty
	Associate		Rehired Faculty      Last Date of Hire: _____
	Professor		Emergency Hire      For These Dates: _____
			Retiree? YES or NO (see instructions on reverse)
<b>Course/Section # *</b>	<b># Workload Hours**</b>		<b>Assignment Type</b>
	<b>Fall</b>	<b>Spring</b>	<b>Funding Source</b>
			<b>Person Being Replaced / Other Info</b>
<b>TOTAL Workload Hrs. (exclude CE)</b>			<i>*For accelerated courses, please note in "Type of Assignment" column and give course start &amp; end dates.</i> <i>**Note CE courses are off-load so <u>do not count</u> in workload total.</i>

Upon the recommendation of the Search Committee and with the majority vote of the Department, I recommend this appointment.

**Department Chair Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Appointment Recommended?					
<b>Signature</b>	<b>Date</b>	<b>Yes</b>	<b>No</b>	<b>Rank</b>	<b>Step</b>
<b>Dean</b>					
				No entry needed	
<b>APSCUF</b> (required for staff teaching appointments only)		<b>Appointment Approved:</b>			
<b>Provost and Vice President for Academic Affairs</b>		<b>Base Salary:</b>			
		<b>Session</b>			

The Provost's Office will distribute:  
 Original to Personnel File; copies to Human Resources, Payroll, Budget, Department, Dean,  
 Planning, Assessment & Analysis

## INSTRUCTIONS FOR COMPLETING THE TEMPORARY FACULTY APPOINTMENT FORM

**ACADEMIC YEAR OF APPOINTMENT** Enter the current academic year – e.g., “2016-17.”

**# OF WORKLOAD HOURS:** Enter the faculty workload hours (note – may be different from student credits). For sick leave replacement, enter the full workload hours and be sure to provide the start and end date of the teaching assignment in the column “Person Being Replaced or Type of Assignment.”

**RECOMMENDATION:** TPTF assignments are ordinarily made at Instructor Step 1.  
TFTF assignments may be made at a higher rank/step depending on qualifications. Master's plus 10 graduate credits required for consideration for appointment at Assistant rank.

**TYPE OF APPOINTMENT:**

- New Faculty – check if a first-time appointment.
- Temporary Faculty (Full or Part-Time) with 60 prior workload hours min. – has preferential hire status. Chairs will be notified each semester of the updated list of these faculty.
- Full-time Temporary Faculty – check if workload is full time for the academic year.
- Rehired Faculty – if yes, check and enter last appointment – ex. “Spring 2016.”
- Emergency Hire – if yes, check and enter specific date of emergency appointment – ex. “Fall 2016,” “08/29/16 – 10/1/16,” etc.
- Retiree: Circle “Yes” if this person is retired from the Commonwealth of PA, the PA Public School System, or PASSHE. If “Yes”, consult with Human Resources and the retiree to confirm if this person can be hired without jeopardizing their pension.

**REVISION #:** For the first appointment form issued for a TPTF in an academic year, type “Original” in this block.  
For the first revision, enter 1; the second, enter 2, etc.

**ASSIGNMENT TYPE:** Enter one of the following:

- Classroom Instruction (includes up to 79% online delivery)
- Distance Learning (80% -100% online)
- Student Teacher Supervision
- Field Supervision
- Clinical Supervision
- Internship/Co-op
- AWA (Alternate Workload Assignment)
- II (NOTE: Temporary faculty can't do IS during the academic year)

**FUNDING SOURCE:** Enter one of the following:

- Department Complement
- Continuing Education
- Dean's Complement Reserve
- Provost's Contingency
- II/IS (if II was the assignment type)
- Sabbatical Leave Replacement
- Sick Leave Replacement
- Parental Leave Replacement
- Child Rearing Leave Replacement
- Acting Manager Replacement
- Other Leave without Pay
- Grant (give name of grant in “Other Info” field)

**PERSON BEING REPLACED OR OTHER INFO:**

- If replacement due to leave, enter name of person replaced.
- For sick leave and other assignments less than a semester long, specify start and end dates (first class – last class).
- If AWA was specified as “Assignment Type,” enter description – for ex., “Program Director.”