

SHORT-TERM FACULTY APPOINTMENT OR REAPPOINTMENT
College of the Environment

Use this form to request appointment or reappointment of "short-term" faculty members. Titles are limited to these only.

Lecturer Part-Time for two quarters or less
Artist in Residence for two quarters or less
Teaching Associate for two quarters or less
Acting Instructor for two quarters or less
Visiting Lecturer for two quarters or less

Research Associate
Research Associate Trainee
Senior Fellow
Senior Fellow Trainee
Visiting Scientist

SEND COMPLETE FORM TO ASSISTANT TO THE DEAN. Original will be returned to the unit when approved.

Department/Program/Institute/School _____

Faculty name _____ **Title** _____

Start & End Dates _____ **Full-time monthly salary** _____

Funding **Budget #** _____ **% of time** _____ **Position #** _____

Budget # _____ **% of time** _____ **Position #** _____

Total % _____

Total Salary _____

Duties _____

If instruction appointment, is teaching evaluated? _____

Average of teaching ratings (from 1 to 5) _____

Comments _____

This department will provide any necessary space associated with this appointment.

Signature of Chair/Director _____	Date _____
Approval of Dean _____	Date _____

When approved by the Dean, this form must be forwarded to Academic Human Resources (with other paperwork as required). A copy should be retained for departmental files.

Name of person to whom this form should be returned

Mail Box Number _____