

Adjunct Faculty Position Request

Employer:	Bann	er ID:	Date:				
Ow&m Ovims	Empl	oyee Name:	Last		' First		
POSITION ASSIGNMENT DATA							
Effective Date		Home Org		Position Action Establish Position Funding Change Change in Rank/Title Abolish Position Other:			
First Day Worked (may be of the offective date)	different	Departmen	ıt				
Position Title/Rank					Position	Number	Class Code
COMPENSATION/LABOR DISTRIBUTION							
Index		Account		Percent			
Term Fall Semester 20 Spring Semester 20 Credit Hours			Academic Year 20 Other: Begin End	-	Employee Action Reappointment as adjunct Salary/Rate Adjustment Change in Term Additional Assignment Other:		
Semi-Monthly Rate To			otal Salary		# Pay Periods		
APPROVALS							
Department Head:			Dean/VP:	ean/VP:		Finance/OSP:	
Date:			Date:			Date:	

Adjunct Faculty Position Request Form - 2024 Jan.pdf Revised 1/4/24