**District Human Resources**

**Approval Request for Non-Faculty Staff to Teach**

**Submission Deadlines to DO HR:** Summer/Fall Semester: **March 15th**  Spring Semester: **October 15th**

|  |  |  |  |
| --- | --- | --- | --- |
| Requested Semester |  | Year |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Employee Name |  |  |  |
|  | *Last* | *First* | *Middle* |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Employee # |  | Home Department |  | Home Campus |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Job Title |  | Direct Supervisor |  |

**Proposed Teaching Schedule** *(To be completed by hiring dept. and submitted to employee’s supervisor for approval.)*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Discipline |  | Campus |  | Department Chair |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Mon | Tue | Wed | Thu | Fri | Sat | Sun |
|  |  |  |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Class/Section |  | ❑ Lec ❑ Lab | Load |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Class/Section |  | ❑ Lec ❑ Lab | Load |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Class/Section |  | ❑ Lec ❑ Lab | Load |  |

***Attach any additional classes on a separate sheet.***

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Total Faculty Work Hours Per Week |  | Total Load |  | Rate *(HR Only)* |  |

**Employee Work Schedule** *(Section to be completed by employee and submitted to direct supervisor for approval.)*

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Mon | Tue | Wed | Thu | Fri | Sat | Sun |
| **Current** |  |  |  |  |  |  |  |
| **Proposed** |  |  |  |  |  |  |  |

|  |  |
| --- | --- |
| Furlough Dates (if any) |  |

|  |  |
| --- | --- |
| Are the classes being taught assigned during non-faculty working hours? | Yes  No |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Work Hours Per Week:** | Current Total |  | Proposed Total During Teaching Assignment |  | Rate *(HR)* |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **❑** *I understand that office hours (optional) must be held outside of my scheduled monthly classified work hours.* |  |  |  |  |
|  | *Employee Signature* |  | *Date* |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **By signing this document, the employee is approved to teach for the designated semester/summer:** |  |  |  |  |
|  | *Direct Supervisor Signature* |  | *Date* |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |
| *Hiring Dean Signature* |  | *Date* |  | *VP of Instruction Signature* |  | *Date* |

**District Office Human Resources Use Only** *Primary PID#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* HR Procedure 3070.05

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| *Range/Step*  *Longevity* |  | *Contract Length* |  | *Class*  *Step* |  | *Wt/Blend*  *OT Rate* |  | *Max Hours* |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Employee Group**  ❑ *Classified* ❑ *Confidential* ❑ *Supervisor* | *Classified FTE* |  | *Faculty Load* |  | *Combined*  *FTE Total* |  |

|  |  |  |  |
| --- | --- | --- | --- |
| *Request is:* | ❑ *Approved* ❑ *Denied* | *HR Manager* |  |

Distribution: Employee, Supervisor, Personnel File, Hiring Department, Scheduler, Office of Instruction, DO Human Resources

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