

Memorandum to: Neva J. Specht, Dean
College of Arts and Sciences

From: _____

Date: _____

Subject: Faculty Contract Request Form

For A&S Use Only

Contract:

New

Renew

Contract Continued

Position # _____

Amount: _____

Additional Funding Sources and Amount:

The **DPC Committee and I wish to recommend that a faculty teaching contract be issued to the following person for the period specified and under the terms indicated.

1. **NAME:** _____ **SSN:** _____ **BID:** _____

2. **ADDRESS:** _____

3. **PROPOSED RANK/TITLE:** _____

4. **PROPOSED SALARY:** _____

5. **Is this person new to the faculty:** Yes _____ No _____
** If yes, first day of employment: _____

Is this person employed in another department or at another UNC institution? Yes _____ No _____
** If you answered **yes**, please provide Institution/department name and number of hours teaching and equivalent hours

** If individual is a full-time EPA or SPA employee at ASU, please attach a memo from supervisor approving the additional work load.

6. **CONTRACT PERIOD:** Fall ___ Spring ___ Academic Yr _____ 12 month ___ Other _____
(Note: Part-Time faculty can only be contracted by semester only)

a) **NUMBER OF HOURS OF INSTRUCTION:**
Please list specific number of hours of instruction _____
Please list the hours per week of instruction (please refer to the UNC System equivalence chart) _____

b) **COURSE(S)/SECTION(S):** [Example: SM 1010-109] _____

7. **COMPLIANCE WITH SACS CRITERIA FOR FACULTY QUALIFICATIONS:**
Please attach the Faculty Certification of Credentials form
(<https://academicaffairs.appstate.edu/sites/academicaffairs.appstate.edu/files/v10deansrec.pdf>)
Note: No contract can be requested without these pages.

8. **Type of Appointment:**

<input type="checkbox"/> New Tenured	
<input type="checkbox"/> One Year Temporary	<input type="checkbox"/> Assistant Professor Tenure Track
<input type="checkbox"/> Non-Tenure Track	____ Years of service toward tenure
<input type="checkbox"/> Replacement for regular faculty member on leave	
<input type="checkbox"/> Part-time appointment	<input type="checkbox"/> Associate Professor Tenure Track
<input type="checkbox"/> EPA Administrative/Reports to _____	____ Years of contract
<input type="checkbox"/> Other (Please specify)	

9. **SPECIAL CONTINGENCIES/ADDITONAL INFORMATION:** Please indicate any other special contingency additional information. (Example: Green Card; J1 Visa; part-time to full-time non-track tenure track)

Note: The DPC Committee must approve all appointments