

IV. SERVICE (*Service units must be listed for the correct unit count - AS OUTLINED IN THE UNIVERSITY APPROVED SERVICE MATRIX*).

Name of Committee/Service	Start Date	End Date	Units

TOTAL SERVICE UNITS _____

Program Committees & Assignments (<i>no workload allocation</i>)	Start Date	End Date

<u>TOTAL SCHOLARSHIP / SERVICE UNITS:</u>	_____
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V. ADMINISTRATIVE/SPECIAL ASSIGNMENT (*See manual for detailed instructions*)

Activity (Specify Outcome or Product)	Units

Total Administrative Units _____

Please include an outline of the activities/time required to perform the administrative tasks listed above (*exception-Program Director appointments and professional training office appointments*) – **62.5 hours/unit**:

VI. GRANTS/CONTRACTS (Note: if the grant provides no teaching buyout, the units should be listed under service and will be included in the 6 unit scholarship/service total. Please also note that federal regulations prohibit overload on grants.)

Grant Name	Agency	Dept Code	Start Date	End Date	Units

Total Grant/Contract Units _____

VII. WORKLOAD TOTALS

On Sabbatical?

If yes, please specify how long or beginning what term in the comments section.

Total Units

Estimated Units for Overload Teaching/Dissertation (payment processed after spring add/drop.

Bying this box, I agree that I am available to pick up dissertations if my workload total falls short by 1 unit or less.

Comments (if any):

VIII. WORKLOAD AUTHORIZATION

I accept the above assignments. I understand that changes may need to be made (based on program needs, class sizes, or other factors) and that any changes must result in the generation of a revised Faculty Workload Agreement, which should be generated after the Fall add/drop dates and then after Spring add/drop date. Please check the box next to the appropriate semester to indicate your approval of the reconciled workload each semester. Final revisions of my workload must be authorized by my Program Director and signed with approval from the Dean and the Provost.

Faculty Signature/Date

Reconciliation

Fall
Spring

Program Director Signature /Date

Reconciliation

Fall
Spring

Dean Signature/Date

Reconciliation

Fall
Spring