

Faculty Reassign Time Proposal

Reassign Time must be approved prior to the beginning of the assignment. At the end of the approved assignment, written documentation of services performed, special projects completed, or implementation of new initiatives must be submitted to the Associate Vice President/ Dean and Provost/Vice President of Workorce Development & Health Sciences.

**Approved reassign time must be integrated into the Faculty Member's Performance Management Process.

Template must be downloaded prior to completion and e-signature.

Date	Semester Requested
Faculty Name	Proposed Reassigned Time Load
Total Semester Instructional Load	Total Semester Student Enrollment
Project Start Date	End Date
Does the faculty member have any application of the second	
Reassign Time Rationale – Continue on ne	xt page if more space is needed
	se of work to be performed, reason for reassign time, benefit to the College, how the elect exceed regular faculty duties and how this is an additional assignment. Include the

Reassign Time Rationale – Continued from previous page		
Annuariala Needle Leeritee ee distributeers		
Approvals Need help setting up a digital signat	ture? https://www.yc.edu/v6/human-resources/docs/performance-review/2020-adobe-sig.pdf	
Faculty Member	Signature	
AVP/Dean/Associate Dean	Signature	
Provost/VP of Workforce Development & Health Sciences	Signature	
	- y	