

OLD DOMINION UNIVERSITY

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Course	Davroll	Form	
CAULISE	Γ avion	1 ()	

Ocurse	i ayron i onn												
	Faculty, FT Admin, a							Dept. C	ontact F	erson	Cor	ntact Email	
	General Informa	tion an	d Appointn										
Last Name				First N	ame						UIN		
Rank				Employ	yee Class						Course	e Classification	
College			Department					Dept. B	udget P	osition N	lo.	Budget Code	
Semester				Course	e Start Date		Cours	e End Da	te		Course	Mode	
PART B:	Proposed Cours	e Assig	ınment							Regular	r Pay	Flat Rate Pay	у
					Actual	Enrollr	nent						
Discipline	Course Number	CRN	Credit	Hours	Enrollment	Capac	ity	Teachl	oad	Rate		Payment	
	1												
	1												
	1												
	/												
	1												
									Tot	al Est. I	Pav		
Justification	n (required)										,		

Distribute the completed form via email for the necessary signatures in Part C. Attach the filled form to a new email by clicking this email button.

PART C: Approvals

BUD signature certifies that this faculty member has completed all the employment requirements.

Do not print and sign. Use your Adobe Signature below.

Budget Unit Director		

Dean/AVP/Director

Once the form has been **completed and signed**, please submit to Academic Affairs for approval:

- 1. Click the button, and
- 2. Upload the form.

Academic Affairs Use Only

Quick Totals					
Eight (8) Pay Periods	Each				
Seven (7) Pay Periods	Each				
Six (6) Pay Periods	Each				
Five (5) Pay Periods	Each				
Four (4) Pay Periods	Each				

Payment Information							
Pay Date Amount							
	_						
Total Earnings							

Comments:

See trasmittal letter for Academic Affairs approval.



Teaching Overload and Release Time Request Addendum

Regularly	Assigned	Courses				Actual	Enrollment	Teachload
Discipline	CRSE	CRN	Course Description	(Credit Hours	Enrollment	Capacity	Associated
Non-Instru	uctional O	bligations(s) (Release time, PRT, R	esearch, Servi	ce, etc.)			
						Total T	eachload	
	. — — -							
Regue	st for A	∆dditior	nal Employment	Addandur	m			
-								
Name of O	utside Emp	oloyer		Location of C	Outside Emp	oloyer		
Describe P	osition or N	Nature of Wo	nrk					
200011201		141410 01 110	,					
Describe D	ays/Hours	of the Week	Utilized by Outside Emplo	yer				
is this emp	loyment or	ie-time, over	a defined period (if so, def	ine the period),	or on-going	<u> </u> ?		
Approva	IS							
When the j	oint/outside	e activity inv	olves teaching or consulting	g for another ins	stitution, the	department	chair and de	an must
		is not in dire	ect or indirect competition v	vith the interests	s of the Univ	ersity or pro	ograms offere	ed by the
departmen	l.							
			sor is confirming that the jo				ct with the Ui	niversity's
mission an	a objective	s ana wiii no	t impede the employee's U	niversity respon	isidilities an	a auties.		
Employee				Immediate S	Supervisor	/Chair		_