

Human Resources Part-time Teaching/Summer Sessions Personnel Action Form

Sample: Part-Time Faculty AAF Only

Empl ID or SS# if New Hire:	123456
Date Prepared:	1/4/16
Preparer's Name:	ABC

NAME (Last, First, MI)			Doe, John				
FT EMPLOYEE OR RETIREE returning retiree, indicate "retired" or "		FT title; if					
TERM CODE and YEAR (Choose One) For "OTH See Dates Below" refer to Odd Date guidelines			Spring 2016 1/19/16 - 5/22/16				
ACTION CODE (Choose One)			REH Rehire				
DEPARTMENT OF TEACHING OR ACTIVITY		Curricular & Instructional Studies					
TAX LOCATION (city, state & percentage where teaching, if other than 100% Akron. Example: Orville 50%, Akron 50%)							
RANK, PT LECTURER LEVEL, OR TITLE		AAF Only					
ACCOUNT CODE (if other than 100%, list distribution percentages)		201340					
RATE PER LOAD HOUR		0					
TOTAL PAID LOAD			0				
SALARY FOR TERM/BASIS			0				
EMPLOYMENT DATA	Building	Room	Phone	Zip + 4		Superviso	r
	ZOOK	130	1234	4205	XXXXXX		
ACTIVITY (Use TRANS coluing TRANS TYPE DEPT CRS SCT SCT	nn for chang COURSE/DES Grant Writing	C/GRANT TITL		A=Add) ACTUAL LOAD 3.00	PAID LOAD 0.00	COURSE TYPE LEC	DL USE ONLY TECH USED

Assistant, Associate, Senior and Special Lecturers agree to comply with the policies, rules and regulations of the University, as adopted and from time to time amended pertaining to part-time faculty appointments, including but not limited to, the administrative and academic requirements of the Sr. VP and Provost. Such rules and regulations are set forth in the University's Board of Trustees rules which are incorporated by reference as if fully rewritten herein. Rule numbers include but are not limited to 3359-11 et seq. and 3359-20 et seq.

Part-time faculty members are expected to work no more than twenty-nine (29) hours per week in combination of all assignments at The University of Akron (includes all campuses/locations). Two (2) hours of preparation /grading time for each load hour assigned above can be credited toward the 29 hours per week limit. Weekly hours in excess of 29 must be pre-approved by the department chair or immediate supervisor. Actual hours worked per week must be reported to the department chair or immediate supervisor on a regular basis.

COMMENTS:

APPROVAL SIGNATURE(S)/DATE					
(1) Supervisor (if FT CP or Staff to acknowledge no conflict with reg FT duties)	(date)	(4) Dean (initiating unit) → Dean (home college if different from initiating unit)	(date)		
(2) Employee (Part-time Only)	(date)	(5) Controller's Office (if grant supported)	(date)		
(3) Dept Chair/Director	(date)	(6) Sr. VP and Provost	(date)		

FULLY APPROVED PERSONNEL ACTION FORMS SHOULD BE FORWARDED TO HUMAN RESOURCES FOR PROCESSING

HR Use Only