

# LECTURER SERIES DATA SUMMARY

NAME:

DEPARTMENT:

(LAST NAME, FIRST)

## TYPE OF REVIEW

### PRE-SIX YEAR:

- ☐ Appointment
- ☐ Reappointment ( \_\_\_\_\_ # of Quarters as of  
proposed Effective Date)
- ☐ Merit
- ☐ 4th Year Increase

### CONTINUING APPOINTMENT:

- ☐ Initial Continuing Appointment
- ☐ Merit
- ☐ Dismissal (Article 30.B)

## PRESENT STATUS (if currently employed)

Title:

Salary Rate: 9 / 11

Percentage of Time:

## PROPOSED STATUS

Title:

Salary Rate: 9 / 11

Percentage of Time:

Effective Date: \_\_\_\_\_ to \_\_\_\_\_

**A CURRENT, UP-TO-DATE HISTORY RECORD IS REQUIRED  
INSERT IMMEDIATELY FOLLOWING THIS PAGE**

## BIOGRAPHICAL DATA:

DEGREE

DATE

INSTITUTION

**To be completed by Dean's Office of School or College having jurisdiction:**

This action:

- ☐ less than 50% (averaged over a 1-year period) therefore does not require Council on Academic Personnel review
- ☐ 50% or more (averaged over a 1-year period) therefore bears the required Council on Academic Personnel comment
- ☐ Dean assumes that with respect to the School or College, this action represents final action

DEAN'S ACTION:

DATE:

CHANCELLOR'S ACTION: ☐ For Retroactivity ☐ Salary exceeds Step 9 of Professorial Scale DATE:

# CONTINUING LECTURER YEARLY ASSIGNMENT OR REVISION

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EMPLOYEE ID	DEPARTMENT CODE	MONTHLY SALARY RATE

ANNUAL ASSIGNMENT NOTICE	ASSIGNMENT REVISION ONLY#	ASSIGNMENT REVISION W/ PERCENT CHANGE	
ASSIGNMENT WILL INCLUDE TEACHING THE FOLLOWING COURSES AND OTHER ASSIGNED DUTIES:			
QUARTER	IWC/ EQUIVALENCY	COURSE NUMBER	COURSE TITLE, SECTION, & OTHER ASSIGNED DUTIES & DESCRIPTION.
FALL			
% PAID			
WINTER			
% PAID			
SPRING			
% PAID			
<b>AVERAGE</b> % <span style="float: right;">Averaging for benefits eligibility may only occur when the initial appointment is made for the entire academic year.</span>			

<b>FUND SOURCE:</b>
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Is employee currently employed by another _____? Name of Institution: _____	% of Time: _____
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**ADDITIONAL COMMENTS:** (#Justification needed in the “Additional Comments” section.)

<b>DEPARTMENT CONTACT INFORMATION</b>  Name & Title  Extension <span style="float: right;">Date</span>	<b>RECOMMENDED BY DEPARTMENT CHAIR OR UNIT HEAD</b>  Signature <span style="float: right;">Date</span>  Name & Title
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**FOR DEAN’S OFFICE USE ONLY:**

<b>Reviewed by:</b>	<b>APPROVED</b>	<b>DECLINED</b>	<b>REQUIRES ADDITIONAL APPROVALS FORWARDED TO APO ON:</b>
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