

## EMPLOYEE REQUEST TO TEACH CLASS

Employee Name \_\_\_\_\_ Date \_\_\_\_\_

I request permission to teach the following class(es) during the \_\_\_\_\_ semester.

Course	SCH	Times		Are courses during regular hours or are they online?
		From	To	

According to the following schedule, I will miss \_\_\_\_\_ hours and \_\_\_\_\_ minutes of work each week and will make up this time as follows. If class is online, skip this section.

	Regular Work Schedule	Altered Daily Work Schedule
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		

**I agree to honor the above course/time schedule to fulfill my responsibilities to the University.**

Signature \_\_\_\_\_ Date \_\_\_\_\_

### Supervisor Response

I **can/cannot** (*circle one*) ensure that the responsibilities and functions of my area will not be adversely affected by the above request. Permission is thus **granted/denied** (*circle one*).

Signature \_\_\_\_\_ Date \_\_\_\_\_

### Account Manager Approval (*if different than supervisor*)

Signature \_\_\_\_\_ Date \_\_\_\_\_

*Employee/Supervisor/Manager: Please keep a copy for your files. If approved, please return original to Academic Affairs (BAB 203/Box C-106); a copy will be sent to the Human Resources Office.*