ADJUNCT FACULTY APPROVAL FORM

Program Seeking Approval: _____

Legal Name of Faculty: _____

A#: _____

It is hereby requested that the above-named person be approved to serve as a faculty member for Vincennes University to teach the following courses:
COMPLETION OF THIS FORM IS NOT CONFIRMATION OF EMPLOYMENT AT VU. A PAYROLL NOTIFICATION MUST BE COMPLETED BEFORE TEACHING AT VU.

Manufacturing

Requested	Approved	Denied	Course #	Course Name
			MFNG-120	Introduction to CNC
			MFNG-120L	Introduction to CNC Laboratory
			MFNG-130	Introduction to Industrial Maintenance
			MFNG-200	Concepts of Plumbing, HVAC, & Refrigeration for Industrial Maintenance
			MFNG-200L	Concepts of Plumbing, HVAC, & Refrigeration for Industrial Maintenance Laboratory
			MFNG-187	Special Instruction
			MFNG-188	Special Instruction
			MFNG-189	Special Instruction
A subtitle is required for all Special Instruction/Project courses -- Please write the requested subtitle in following the * on the appropriate course line**				

Updated for 2023-24 Academic Year

REVIEWED BY:

Non-Vincennes Campus		**Vincennes Campus**	
Department Chair/Program Chair	Date	Department Chair/Program Chair	Date
Director/College Dean	Date	College Dean	Date
Vice President	Date	Provost	Date

NOTES: _____