

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.**

Technology

Requested	Approved	Denied	Course #	Course Name
			TECH-300	Workplace Diversity
			TECH-310	Technology Project Applications I
			TECH-360	Technology Project Applications II-Internship
			TECH-375	Industrial Supervision
			TECH-410	Technology Project Research I
			TECH-415	Workplace Safety
			TECH-421	Facilities Planning
			TECH-425	Current issues in Technology
			TECH-455	Problem Solving
			TECH-490	Technology Research Methods: Capstone
			TECH-187	Special Instruction***
			TECH-188	Special Instruction***
			TECH-189	Special Instruction***
			TECH-297	Special Project***
			TECH-298	Special Project***
			TECH-299	Special Project***

**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:
