New Adjunct Faculty Contract Request Form

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Name of Faculty Member:	Teaches (UG/G/both):
School:	Discipline:
Contract Term	
(fall, spring, summer):	Contract Year:
Course & Section(s):	Course Location:
Includes clinical	G-1 Course Data
supervision?	Salary or Course Rate:
Rank will be Adjunct Instructor unless otherwise in	dicated:
Contact Information:	
Email:	
Filone	
(specify type, if known):	
City, State Zip:	
Major/Program 1:	
Major/Program 2:	
Graduation Year:	
Highest degree?	
Transcript on file: Official Unofficia	
Data	<u>.</u>
Date	HR Use:
Date	Date
Date	Date Background Screening Complete
Date	Date
Date	Date Background Screening Complete Paycor Invitation

Notify Registrar, School, HR Email Address Requested