

Authorization for Employment (ATE) for Part-Time Faculty

College/Division: _____ Department _____

Applicant Name: _____ CIP Code: _____

Proposed Appointment Date: _____ Proposed Rank/Title: _____ Temporary Regular

Other employment for UWG, USG, or eCampus _____ Hours _____

Agreement Regarding Completion of Degrees: _____

Applicant: Is Related to a Current University of West Georgia Employee Yes No
 Is Conversant in English Yes No
 Highest Degree Has Been Verified Yes No
 Retired from the University System of Georgia Yes No

If retired, please specify retirement company: _____ Date of Retirement: _____

TRS Approved No Yes Date of approval _____

Budget: Department _____ Fund Code _____ Position Number _____ Pay Amount _____

Funding Available: Yes No Reviewed by Provost Budget _____

Budget Services

Date

Comments

Credentials Education: Degrees, Major, Institutions, Dates; Experience; Additional Comments: Recommendations, Special qualifications (required if applicant has less than 18 credit hours graduate work in teaching field); use reverse if needed. Please include the course(s) that will be taught below:

Term:				Begin Date:		End Date:	
CRN	Course	Contact Hours	Standard Hours Worked (Per Week)	Days	Times	Location	Compensation
Total							

Approvals: Do Not Offer Conditional Employment or Change of Status until all approvals are obtained.

Department Chair _____ Date _____ Dean _____ Date _____

Provost and Vice President for Academic Affairs _____ Date _____ Comments _____