Name of Candidate				BGSU ID#			
.ddress ( <mark>Dept. or Sc</mark>	hool preferred)						
YPE OF APPOIN							
Retired BGSU Retired BGSU	U Faculty Ad	ntinuing Adjun ministrative St	ct (last semester t aff*	aught)			
Faculty Overlo	oad						
	neduled during	work hours?	yes no		ng:		<u></u>
<ul><li>Credentials Neede</li><li>Letter of App</li><li>Resume</li><li>Official Trans</li></ul>	lication		R returning fac	culty with a or	ne-year break in	service:	
<ul><li>Current (origi</li><li>Completed I-</li><li>Background of</li></ul>	inal) Letter of R 9 Form (Colleg check dentials must b	Recommendatine office will have be submitted to	andle)  the College of	·	ar old) ontract can be iss	sued. The I-9 forn	n is not
ERMS OF CONT							
Contract Period:							
Semester		Academic Y	ear	Other	(specify dates)		
Rank:							
Rate Per Credit H	our: \$		То	tal Payment: \$			
	alog Nbr: <u>A&amp;</u>		_ Class Section	n: <u>1001</u> Cla	ss Nbr: <u>71667</u>	Unit Hours _	<mark>3</mark>
Subject/Cat	alog Nbr:		_ Class Section	1:Cla	ss Nbr:	Unit Hours _	
Subject/Cat	alog Nbr:		_ Class Section Class Section	i:Cia i:	ss Nbr: ss Nbr:	Unit Hours _ Unit Hours	
Subject/Cata							
Subject/Cata source of funds: † Department numbe	er to be charged	d if other than	regular departn	nent /school			
Subject/Cata Source of funds: † Department numbers this course(s) list	er to be charged ted in the Unsta	d if other than affed Courses	regular departn Report? Yes	nent /school No			
Subject/Cata Source of funds: † Department numbe s this course(s) list f no, why not?	er to be charged ted in the Unsta	d if other than affed Courses	regular departn Report? Yes	nent /school No			
Subject/Cata cource of funds: † department numbers this course(s) list no, why not?	er to be charged ted in the Unsta	d if other than affed Courses	regular departn Report? Yes	nent /school No			
Subject/Cata Source of funds: † Department numbers this course(s) list Fino, why not? Signature, Chair/Di	er to be charged ted in the Unsta	d if other than affed Courses	regular departn Report? Yes Date	nent /school No	Departmer		
Subject/Cata Subject/Cata Subject/Cata Subject/Cata Subject/Cata Source of funds: †  Department numbe s this course(s) list f no, why not?  Signature, Chair/Di  Signature, Dean  For A&S Office use only	er to be charged ted in the Unsta	d if other than affed Courses	regular departn Report? Yes  Date  Total Payment	nent /school	Departmer	nt/School	