

**Southwestern Illinois College
Adjunct Faculty – Instruction
Request for Assignment – Fall 2015**

Name _____ ID# _____ Dept/Program _____
Street Address _____ City _____ State _____ Zip _____
Home Phone _____ Work Phone _____ Other Phone (i.e. Cell) _____
Email Address _____ Is it okay to contact you at work? _____

Please check this box if any of the above information has changed in the past semester/term. Contact your Chair, or Coordinator, **and** your Dean's secretary with any change of information that occurs during the semester.

By checking this box, I hereby request to teach during the Fall 2015 semester/term, at least six (6) or more equated hours, **if sufficient classes are available** in the department or discipline in which I do the major portion of teaching and for which I meet the minimum instructor requirements and have maintained satisfactory performance evaluations. I understand that my Department Chair/Program Coordinator shall attempt to honor my preferences and availability, in accordance with Section 4.4 of the Agreement, **provided that my preferences and availability comport with scheduling needs and course availability**. I further understand that the final assignment shall be determined by my Dean and/or Vice President and that I must complete and return an Acceptance of Assignment form indicating my agreement to the assigned load to my Vice President (designee) as directed.

By checking this box, I chose to teach less than six equated hours in accordance with Section 4.4 of the Adjunct Faculty Agreement during the Fall 2015 semester/term. **I understand that this decision may impact my status in the bargaining unit.**

By checking this box, I am requesting max load status in accordance with Section 4.5 of the Agreement, dependent upon scheduling needs, the availability of maximum load opportunities and my seniority status. I have successfully earned more than 100 equated hours of seniority as reflected on the Seniority List dated August 1, 2014, and wish to achieve the maximum teaching assignment of no more than 27 equated hours over the next academic year (Fall 2015 and Spring 2016 semesters/terms). I further understand that I must submit my preferences and availability to my Vice President in accordance with the deadline established for this purpose. Additionally, I understand that the nature of the equated hours assigned to the courses for which I am qualified to teach may prevent the assignment of a balanced load between the fall and spring semesters; and, that assignments to more than one campus, assignments to extension centers, and/or assignments to both day and evening classes may be necessary to complete my maximum load opportunity. **I acknowledge that I may not refuse the load assigned and that I may be disciplined up to and including termination if I fail to fulfill the assigned teaching load granted under the provisions of Section 4.5.** I further acknowledge that I must submit an updated Portfolio attesting to the fulfillment of the requirements found in Article 13, provided that said Portfolio is submitted, reviewed and approved prior to the deadlines established by the Administration. **When there are more adjunct assistant professors, adjunct associate professors and adjunct professors competing for the opportunity to maximize their load than there are available assignments within a department, program or discipline, the Administration shall fill the maximum teaching load assignments using the order of: Adjunct Professor(s), Adjunct Associate Professor(s) and Adjunct Assistant Professor(s) having the greatest seniority within those departments, programs or disciplines.**

Fall 2015 Preferences & Availability

(Must be received by the Dean on or before February 2, 2015)

(Failure to submit by the deadline may result in no teaching assignment(s) for the Fall 2015 semester)

Preferences and availability will be processed in accordance with the collective bargaining agreement. Your assignment will be confirmed upon receipt of an Acceptance of Assignment form.

Number of equated hours you prefer to teach this semester: _____

Preferred courses for which I am available and meet the MIRs: _____

I am available on these days and and at these times: _____

I am not available on these days and at these times: _____

Preferred location(s): _____

Adjunct Instructor Signature

Date of Request by Instructor

Dean/Director Signature

Date Received by Dean