STUDENT AFFAIRS STAFF TEACHING ACADEMIC COURSES
Revised June 19, 2014

The following procedure will be used by Student Affairs Staff who desire to teach academic courses with or without extra pay. The procedure must be completed and approval given before a staff member commits to a teaching assignment. The Division supports exempt staff in teaching one class per semester. Special permission to teach two courses must be obtained from your SAMC representative (by completing the Student Affairs Request for Teaching Academic Courses form). Only one course may be taught during normal work hours as long as time devoted to teach is made up. If applicable, please use this form to request permission for both courses you want to teach.

A request that includes course title, number of credit hours, day, and time of day must be submitted through administrative channels to the appropriate member of SAMC via the Student Affairs Request for Teaching Academic Courses form. SAMC may reject the request based upon departmental demand for services.

Teaching a class is a commitment above the expectations that staff members will devote 100% of their time to the fulfillment of primary job responsibilities. Therefore, all activities related to teaching (preparation, grading, advising of students, and actual class instruction) must be done on a staff member’s own time. If done during normal work hours, those hours must be made up (as agreed upon with the supervisor) or with vacation leave.

Please submit your teaching request forms to your supervisor no later than the following dates:

- Summer Term Classes: March 1st
- Fall Semester Classes: March 1st
- Spring Semester Classes: October 1st

Supervisors, please be sure that your SAMC representative received the approval form prior to the deadlines listed above (Staff may teach one class or up to four credit hours a semester with the written approval of the director/program head). If teaching more than four credit hours the following limits and approvals apply (as outline in PPM 3-48)

1. The supervising dean-level/director administrator must review and approve in writing up to 15% of base salary. (In the Division of Student Affairs the “Request for Teaching Academic Courses form must be submitted to the Vice President for Student Affairs office.)
2. The supervising vice president/provost must approve in writing extra compensation in excess of 15% of base salary.
3. Amounts in excess of one-third (33 1/3 percent) of base salary should be treated as extraordinary exceptions and should be infrequent, temporary and based on circumstances where critical service needs of the University cannot be met by standard employment processes.

Your SAMC representative or Sandy Hogge in Human Resources can assist with you estimating supplemental pay via Argos.
Request for Teaching Academic Courses  
Student Affairs

Name: ________________________________________________________________

Semester: _____________________________________________________________

Course Title: ___________________________________________________________________

College/Department: ___________________________________________________________________

Number of Credit Hours: _____________

Day/s: _________________________________________________________________

Time: _________________________________________________________________

Course #2 Title: ____________________________________________________________

College/Department: ___________________________________________________________________

Number of Credit Hours: _____________

Day/s: _________________________________________________________________

Time: _________________________________________________________________

Supplemental Pay: Yes _____ No _____
Estimated pay for this course (s) $__________
Estimated pay for all supplemental teaching assignments this fiscal year $__________

Arrangements agreed upon for meeting time requirements of contract position:
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

Supervisor Recommendation Yes _____ No_______
Supervisor’s Signature _________________________________________________________

SAMC Approval _____________________________________________________________

Date: ________________________________

Vice President Approval (if necessary) _____________________________________________

Date: ________________________________

President Approval (if necessary) ________________________________________________

Date: ________________________________