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Overload Approval Page

This overload approval page is being used in lieu of a separate contract.

A copy of the approved workload plan must be attached.

This form is for TT faculty only. (All NTTs are requested on a contract request form as additional pay.)

Faculty Member's Name: _____

College: _____ Department: _____

Quarter and academic year in which work is being completed: _____

Number of workload units: _____ Year to date workload unit total: _____

Rate per Workload Unit (sr lecturer, terminal degree rate): _____

Total overload compensation: _____ Semi-Mthly Payment: _____

Funding Source: _____

Brief description of the work being performed for the overload:

Approvals:

Date Submitted &/or Approved in Faculty180

Faculty Member

Date

Department Chair

Date

Dean

Date

Provost

Date

NOTE: If a faculty member's approved annual workload plan includes an overload assignment but is subsequently reduced to 45 or fewer workload units for the academic year, the faculty member's compensation for the remainder of the academic year will be adjusted as required to conform to the reduced workload plan. Such adjustment, if any, will be made as of the academic quarter in which it first appears that the annual workload plan has been reduced to 45 or fewer workload units for the year.

Central Washington University

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