

College of Arts & Sciences Annual Work Plan

Emp. ID #

Academic Year	Faculty Name	Check if Term App't.	<input type="checkbox"/>
Rank	Department	Check if Revised	<input type="checkbox"/>

The information entered on pages 1 and 2 of the Annual Work Plan includes only commitments for base salary. Record assignments for X-pay or other overload on page 3 of this document. Work Plan % of effort should total 100.

Instruction (Normal range 40% to 80%). **ONLINE AND FACE-TO FACE** Clearly indicate courses to be banked for future credit and show % effort as 0. Explain plan for use of banked courses under "Additional Information" on page 2. Indicate banked courses being redeemed under "Comment," showing when course was banked. If course load deviates from the standard in the department, explain under "Additional Information" on page 2.

A. Courses (Normally 10 % each) :

Course No. and Section	Term	Cr Hrs	Distance ed course?	Comment	% Effort

B. Supervision of graduate assistants or other personnel in **LABS, RECITATION AND/OR DISCUSSION SECTIONS**

Course No. and Section(s)	Term	No Sections	Comment	%Effort

C. Supervision of indep. st. and Honors students (Normally 1-2% each). # Students expected _____

D. Supervision of thesis and dissertation students and of post-docs. Students expected _____

E. Professional development focusing on inclusion and equity in teaching.

F. Other (explain)

Total Percentage of Effort in Instruction

Research and Creative Activity (Normal range 10% to 55%). Indicate nature of activity and expected accomplishments. For externally funded activity, please provide agency, grant number, and % effort for each grant.

Total Percentage of Effort in Research and Creative Activity

Faculty Name

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Service (Normal range 5% to 20%)	
Category of Service:	% Effort
A. Student Advising (% time spent)	
B. Participation in college and department meetings (Normally 3%)	
C. Professional development or service that promotes diversity.	
D. Service to the University. Describe committee service and other expected activities:	
E. Service to the Community. Describe expected activities:	
F. Service to the Profession. Describe expected activities:	
G. Administration. Title of position: _____	
Total Percentage of Effort in Service	
Total Percentage of Effort in Instruction, Research and Creative Activity, and Service	

Revisions (note the date and what specifically has changed) or additional information:

Faculty Name _____ Dept . _____ Emp. ID

Academic Year _____

Contract Type (check one):
 FAC-09
 FAC-11: List Administrative Title
 Pay Schedule: 10 months 12 months (annualized)

Additional Teaching Assignments for X-Pay:

Course No.	Term	Cr. Hrs.	If distance ed. course	Comment - Include speedtype and amount of compensation

Additional Administrative Assignments or Service Activities for Supplemental Pay or other Additional Compensation:

Title	Semester (Fall Spring and or Summer)	Total Compensation	Brief Description of Responsibilities	Comment/funding source

For Faculty with Externally Funded Projects:

Funding Agency	Account Number (Speedtype)	Total annual value of grant	% of base salary paid by agency as buyout of your academic year time (i.e. salary recovery), if any. This does NOT include summer salary	Amount of summer salary, if any, and dates / months of payment: indicate percentage or fraction

Name

Dept .

Emp.ID

[Empty box for Emp.ID]

Other Additional Compensation Arranged, if any, with Explanation: (Include description of activities, duration of activities, total compensation, source of compensation - start-up funds should be included here only if paid as summer salary.)

Signatures

All assignments are subject to revision according to program needs. This Work Plan agreement is subject to correction of typographical or mathematical errors. This agreement is subject to general regulations for faculty appointments, the Personnel Policy of the College of Arts and Sciences, and, where applicable, to conditions of appointment carrying the A-12 status.

By my signature as a faculty member, I agree to the assignments indicated on all pages of this document and I agree to meet the obligations of this agreement. My signature indicates also that I have an Attestation and Disclosure form on file with the University.

Faculty Member's Signature

Date

Department Chairperson Signature

Date

Dean's Office Signature

Date