



APPLICATION FOR SUBSEQUENT TEMPORARY FACULTY APPOINTMENT

To be used only for **Temporary Faculty** currently employed at SFSU.

*(If employment is sought in more than one department,
a separate application must be filled in each department.)*

NAME: _____ Current Address: _____ _____ Home Telephone: _____ Campus Extension: _____	CURRENT APPOINTMENT AT SFSU Dept: _____ Term: <input type="checkbox"/> Fall <input type="checkbox"/> Spring <input type="checkbox"/> AY Current Timebase in Department: _____
---	---

SUBSEQUENT APPOINTMENT REQUEST:
 Department: _____; Term: Fall Spring AY
 Other requests (optional). Requests for change in time base, schedule, or courses should be stated in the space provided below: _____

UPDATE SINCE LAST APPLICATION:

Degree earned: _____

	Institution	Field	Date
<input type="checkbox"/> Courses taught at SFSU:	Dept: _____	Course # _____	Section(s) _____
	Dept: _____	Course # _____	Section(s) _____
	Dept: _____	Course # _____	Section(s) _____
	Dept: _____	Course # _____	Section(s) _____
	Dept: _____	Course # _____	Section(s) _____

Courses taught elsewhere: _____

Additional relevant training/professional experience:

A current curriculum vitae is attached (optional)

The above statements are true to the best of my knowledge and belief.

SIGNATURE: _____ **DATE:** _____

I have reviewed this application for subsequent appointment and previous periodic evaluations, if any.

DEPARTMENT CHAIR: _____ **DATE:** _____