ADJUNCT FACULTY APPROVAL FORM

Program Seeking Approval: _____

Legal Name of Faculty: _____

A#: _____

It is hereby requested that the above-named person be approved to serve as a faculty member for Vincennes University to teach the following courses: **COMPLETION OF THIS FORM IS NOT CONFIRMATION OF EMPLOYMENT AT VU. A PAYROLL NOTIFICATION MUST BE COMPLETED BEFORE TEACHING AT VU.**

Accounting

Requested	Approved (Initial)	Denied (Initial)	Course #	Course Name
☐			ACCT-100	Basic College Accounting
☐			ACCT-140	Introduction to General Ledger
☐			ACCT-141	Introduction to Accounts Payable/Inventory
☐			ACCT-142	Introduction to Accounts Receivable
☐			ACCT-143	Introduction to Payroll
☐			ACCT-152	Introduction to Agricultural Accounting
☐			ACCT-201	Financial Accounting
☐			ACCT-202	Managerial Accounting
☐			ACCT-205	Intermediate Accounting
☐			ACCT-206	Payroll Accounting
☐			ACCT-207	Auditing
☐			ACCT-255	Income Tax Accounting
☐			ACCT 260	Cost Accounting
☐			ACCT-291	Accounting with QuickBooks
☐			ACCT-292	Accounting Cases and Problems
☐			ACCT-295	Individual Income Tax Preparation
☐			ACCT-187	Special Instruction***
☐			ACCT-188	Special Instruction***
☐			ACCT-189	Special Instruction***
☐			ACCT-297	Special Project***
☐			ACCT-298	Special Project***
☐			ACCT-299	Special Project***

A subtitle is required for all Special Instruction/Project courses --
Please write the requested subtitle in following the * on the appropriate course line**

Updated for 2021-22 Academic Year

REVIEWED BY:

Non-Vincennes Campus

Department/Program Chair _____ Date _____

Director/College Dean _____ Date _____

Vice President _____ Date _____

Vincennes Campus

Department/Program Chair _____ Date _____

College Dean _____ Date _____

Provost _____ Date _____

NOTES: _____