

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.**

American Sign Language

Requested	Approved (Initial)	Denied (Initial)	Course #	Course Name
			ASLG-101	American Sign Language I
			ASLG-103	American Sign Language II
			ASLG-111	The Deaf Culture and Community
			ASLG-118	Serving Deaf People in the Community
			ASLG-201	American Sign Language III
			ASLG-203	American Sign Language IV
			ASLG-206	American Sign Language Features I
			ASLG-208	American Sign Language Features II
			ASLG-210	American Sign Language Literature
			ASLG-216	Service Learning in the Deaf Community
			ASLG-220	Linguistics of American Sign Language
			ASLG-250	Introduction to Interpreting
			ASLG-187	Special Instruction***
			ASLG-188	Special Instruction***
			ASLG-189	Special Instruction***
			ASLG-217	Fingerspelling and Numbers in ASL
			ASLG-297	Special Project***
			ASLG-298	Special Project***
			ASLG-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

Vincennes Campus

 Department Chair/Program Chair Date

 Department Chair/Program Chair Date

 Director/College Dean Date

 College Dean Date

 Vice President Date

 Provost Date

NOTES:
