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.**

Restaurant and Food Service Management

Requested	Approved (Initial)	Denied (Initial)	Course #	Course Name
			REST-100	Introduction to Hospitality Management
			REST-120	Food Service Sanitation
			REST-121	Food Sanitation Essentials
			REST-155	Quantity Food Purchasing
			REST-200	Hospitality Human Resources Management
			REST-211	Beverage I-Responsible Alcohol Service
			REST-212	Beverage II-Alcohol Beverage Management
			REST-213	Beverage III-Non-Alcohol Beverage Management
			REST-220	Legal Aspects of the Hospitality Industry
			REST-230	Menu Planning and Facility Design
			REST-240	Banquet, Catering, and Operational Management
			REST-270	Hospitality Services Internship
			REST-187	Special Instruction***
			REST-188	Special Instruction***
			REST-189	Special Instruction***
			REST-297	Special Project***
			REST-298	Special Project***
			REST-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: _____