

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.**

Sociology

Requested	Approved (Initial)	Denied (Initial)	Course #	Course Name
			SOCL-141	Applied Sociology
			SOCL-151	Principles of Sociology
			SOCL-153	Introduction to Social Work
			SOCL-154	Cultural Anthropology
			SOCL-164	Introduction to Multicultural Studies
			SOCL-180	Clinical Aspects of Substance Abuse
			SOCL-181	Therapeutic Interventions with Substance Abuser I
			SOCL-240	Social Work Practice
			SOCL-245	Cultural Diversity: Sociology
			SOCL-250	Sociology of Aging
			SOCL-251	Introduction to Social Welfare and Social Work
			SOCL-252	Social Problems
			SOCL-254	Introduction to Archaeology
			SOCL-260	Sociological Aspects of Death
			SOCL-261	Sociology of Relationships and Families
			SOCL-266	Human Behavior in the Social Environment
			SOCL-280	Therapeutic Interventions with substance Abusers II
			SOCL-281	Substance Abuse Treatment Programs
			SOCL-187	Special Instruction***
			SOCL-188	Special Instruction***
			SOCL-189	Special Instruction***
			SOCL-297	Special Project***
			SOCL-298	Special Project***
			SOCL-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:

