

# 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.**

## Spanish

Requested	Approved (Initial)	Denied (Initial)	Course #	Course Name
			SPAN-100	Basic Conversational Spanish
			SPAN-101	Spanish Level I
			SPAN-103	Spanish Level II
			SPAN-116	Explor the Spanish-Speaking World
			SPAN-118	Conversational Spanish for Public Safety
			SPAN-119	Conversational Spanish for Technology Supervisors
			SPAN-124	Survival Spanish for Nurses I
			SPAN-127	Survival Spanish for Horticulture Majors
			SPAN-201	Spanish Level III
			SPAN-203	Spanish Level IV
			SPAN-211	Intermediate Spanish Readings I
			SPAN-212	Intermediate Spanish Readings II
			SPAN-217	Intermediate Conversational Spanish
			SPAN-230	Survey of Spanish Civilization
			SPAN-240	Survey of Latin American Culture
			SPAN-187	Special Instruction***
			SPAN-188	Special Instruction***
			SPAN-189	Special Instruction***
			SPAN-297	Special Project***
			SPAN-298	Special Project***
			SPAN-299	Special Project***
<b>A subtitle is required for all Special Instruction/Project courses --                      Please write the requested subtitle in following the *** on the appropriate course line</b>				

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:**

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