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	Explore 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***
		-	-	al Instruction/Project courses

Please write the requested subtitle in following the **

Updated for 2023-24 Academic Year

Vincennes Campus

REVIEWED BY:

Non-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:			