



West Chester University of Pennsylvania

Alternate Workload Assignment

INSTRUCTIONS FOR COMPLETING FORM: Applicant should complete all pertinent information and obtain funding information before forwarding to the Department Chair, who will then forward to the dean's office. The dean's office will submit a list of all AWA assignments to the Provost and President for approval each semester.

A.
Name: _____
Signature: _____
Dept: _____

B. Indicate workload equivalency in credit hour for each semester:

Fall	_____	_____	credit hours
	(year)		
Spring	_____	_____	credit hours
	(year)		
Summer I	_____	_____	credit hours
	(year)		
Summer II	_____	_____	credit hours
	(year)		
Summer III	_____	_____	credit hours
	(year)		

C. Replacement Necessary? Yes No

Please indicate funding source (e.g. Dept/Dean/External Source): _____
SAP Cost Center: _____
Org Manager's Name: _____
Signature: _____

D. Assignment: Title: _____
Tasks to be accomplished:

This section should be completed for non-contractual alternate work assignments only.

E. Recommend: Yes No
Department Chair _____ Date _____
Yes No
Dean _____ Date _____

(Use the second page of this form for additional comments)

