

To: Dr. Christine Sapienza, Interim Provost & SVPAA

**JACKSONVILLE UNIVERSITY**

**FACULTY OVERLOAD  
ADJUNCT FACULTY AGREEMENT TO HIRE**

Name of faculty member:

Department:

This agreement is to cover the instruction of:

| Course ID/<br>Section# | Sync # | Semester Hours | Session/Term<br>(i.e. 18FAZ) | Total Pay |
|------------------------|--------|----------------|------------------------------|-----------|
|                        |        |                |                              |           |
|                        |        |                |                              |           |
|                        |        |                |                              |           |
|                        |        |                |                              |           |

Services will be rendered between \_\_\_\_\_ and \_\_\_\_\_  
(date) (date)

**Qualifications** (select only one of the following):

This faculty has a \_\_\_\_\_ (state highest degree) from \_\_\_\_\_  
I have reviewed his/her transcripts and ensured he/she has at least a Master’s degree and has a minimum of 18 credit hours of graduate coursework in \_\_\_\_\_ (state discipline), meeting SACS recommendations.

This faculty does not have the required qualifications to teach the course(s) listed above. The attached Course Learning Outcomes Memo has been prepared to reflect his/her alternate qualifications.

**\*Adjunct Clause:** All necessary documentation has been requested from academic institutions granting the degrees and proofs of those requests have been sent to Academic Affairs. The adjunct understands and acknowledges that he/she will not be paid until all original transcripts are on file in the Office of Academic Affairs.

These services also require the filing of final grade reports in the Office of the Registrar at the end of each term.

It is understood that this agreement is contingent on the special needs of Jacksonville University which may be influenced by student enrollment patterns. Hence, this agreement may be canceled at any time by Jacksonville University.

\_\_\_\_\_  
Dean

\_\_\_\_\_  
Division Chair

\_\_\_\_\_  
Faculty

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

**JACKSONVILLE UNIVERSITY IS AN EQUAL OPPORTUNITY EMPLOYER**