

	,	r is hereby ce PASSHE/AP						mpensa	ition	`	int on Yell 0-3-210-66		
Name Rank									osition Number				
				Step Estimated Cost Grant Funded (Y/N)									
Fall Seme	ester/ Fall		G	iani Fundi		tify Overlo	ad Cou	 rse(s) w	ith a	n (*)			
Dept/Crs Number	# of Sect	Course Title		Grad Cour	Cr Hrs	# Student Interns	# Weeks Comp.	ks # Stu Tead	udent chers .6	Equated Workload Hours	Number Prep	Projected Number Enrolled	
A) A atual u											1		
1		semester nich overload is											
l '	•	semester (A) i		•						09/12/15		Supplemental Hrs.	
										03/12/13		оприетителнат по.	
	, <u> </u>							<u> </u>		1		<u> </u>	
Spring Se	mester/ Sp	ring		1	Iden	tify Overlo	oad Cou	rse(s) w # Studen		n (*) Equated			
Dept/Crs Number	# of Sect	Course Title	Grad Cou	r Cr Hrs	# Stu Inte		Veeks omp.	Teachers 0.6			Number Prep	Projected Number Enrolled	
					_				$\perp$				
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				+					+				
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1	•	pring semeste					L						
E) Actual workload - total year (A) plus (D)									-		N/A		
F) Standard workload - total year G) Total eligible overload -year (E) minus (F)								40	+	18/21/24	NI/A	Supplemental Hrs.	
I -	-							N/A	+	N/A	N/A		
H) Extra preparations this semester (D) minus (F)								14// (	$\top$	14/71	N/A	Supplemental Hrs.	
		g semester -											
Justificati	on/Remarks	S					-			-			
											_		
Signature													
Date:	-			irperson Dean				Vice I	Presi	dent	*President		

NOTE: All requests for overload which exceed 3 credits for any faculty member during the academic year must be approved by the President. Overload requests for faculty who have released time must also be approved by the President(\*). Requests for overload must be approved to inclusion in the schedule.