MID TERM COURSE REASSIGNMENT WORK SHEET (purple form)

Name of terminating faculty member:				CWID:		
Reason for termination:	voluntary (see attached resignation letter)			involuntary (see attached documents)		
Cost Center No.:		Account No.:				
Division Description			Data			
Division Dean Signature LIST ALL	. COURSE NAMES AND S	ECTION	Date IS REASSIGN	ED OR END	<u>DED</u>	
Course and Section #:	Last class ta	taught (date):			class (day):	
HR use only: # of days taught	t:					
Course and Section #:	Last class ta	taught (date):		Last	Last class (day):	
HR use only: # of days taught	t:					
Course and Section #:	Last class		aught (date):		Last class (day):	
HR use only: # of days taught	t:					
WILL YOU CONTINUE TO TEACH OTHER CLASSES: YES				3	NO	
PRO RATE PAY: TOTAL CO	NTRACT AMOUNT (Endin	g Cours	es)			
FYTD Paid Thru:				\$_		
				\$_		
				\$_		
				\$_		
BALANCE DUE/ OVERPAYMENT:				T	OTAL DUE: \$	
Affected pay periods:						
Name of faculty assuming class/s:				CWID:		
Cost Center No.:			Account No.:			
Day first class taught:		Day first class taught:		t:		
ARE YOU CURRENTLY TEACH	HING OTHER CLASSES?		YES	3	NO	
PRO-RATE PAY: Affected Pay Periods:				Т	OTAL DUE: \$	