

# NON-FACULTY TEACHING APPROVAL



Per UT Policy #3364-72-14: Teaching by non-faculty employees, full-time staff employees not holding faculty rank are restricted to teaching no more than one course per semester or no more than ten (10) credit hours per year. This form should be completed regardless if teaching inside or outside work hours for any course taught for extra compensation.

A UT employee must receive written permission from his/her supervisor, the vice president responsible for the area (excluding the Division of Academic Affairs which would require a second provost signature), the college dean and the department chair in which the course is taught by completing this approval form for each course.

Submit the completed and signed form, along with the Extra Compensation Form (UPA) to the Office of Academic Finance: drop off at UH 3330 or send via campus mail at MS 939. The form must be turned in 15 days prior to the start of the course.

---

## STAFF MEMBER INFORMATION

Name: \_\_\_\_\_ R# \_\_\_\_\_  
Title/Position: \_\_\_\_\_ Office/College: \_\_\_\_\_

---

## COURSE INFORMATION

Course Number, Course Section Number, Title: \_\_\_\_\_

Day and Time of course: \_\_\_\_\_ Academic Term & Credit hours: \_\_\_\_\_

College: \_\_\_\_\_ Department: \_\_\_\_\_

Will this course be taught *inside* or *outside* of normal work hours? (Select One)    Inside    Outside

Describe how you will make up work time if course taught *inside* work hours: \_\_\_\_\_

Will this course put you over the course or credit hour limits for this academic year? (Select One)    Yes    No

If yes, please attach the Provost's written approval (copies of emails are acceptable) to teach more than one course per semester or over ten (10) credit hours per year.

---

**I agree to the plan outlined above while teaching this course inside of my normal work hours OR I agree to conduct course teaching and business outside of my normal work hours:**

\_\_\_\_\_  
*Employee signature*

\_\_\_\_\_  
*date*

## APPROVALS

\_\_\_\_\_  
*Supervisor signature /date*

\_\_\_\_\_  
*Vice President signature /date (excluding Academic Affairs)*

\_\_\_\_\_  
*Department Chair signature /date*

\_\_\_\_\_  
*College Dean signature / date*

**FOR OFFICE USE ONLY** (*Provost signature obtained by the Office of Academic Finance*)

*Office of the Provost signature / date* \_\_\_\_\_