



FACULTY STAFFING REQUEST FORM

School:

Department:

Position/Title:

___ *Number of Positions Requested*

(If this is a non-instructional position, please disregard the chart below and move to the questions on page 2.)

Quantitative Criteria: *(use data provided by the Office of Institutional Research and Planning)*

	Fall 2016	Spring 2017	Fall 2017	Spring 2018	Fall 2018
FTEF					
FTEF: % FT					
FTEF: % PT + OL					
Number of Sections					
FTES					
Percent Fill					
Total WSCH					



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Qualitative Criteria

1. Job Description:
2. Potential instructional load (*FTE, Courses, number of sections; no need to submit days/times of teaching schedule at this time*) and/or library/counseling/administrative/coordinator load:
3. Availability of qualified hourly faculty to teach (if relevant):
4. Justifications for this position (no full-time faculty, growth of the program, in need of specific expertise):
5. If this is a “replacement” position, when was it vacated? What will be the impact on the program and the College if this position is not replaced?
6. Other factors considered relevant (e.g., legal mandates):
7. Was this position requested in your Program Review/Annual Program Review update? Yes or No

If yes, please attach relevant section from your Program Review/Annual Program Review update.

If no, please explain why it was not included in your Program Review/Annual Program Review update: