Student Learning Outcome (SLO) – Flex Pay for Part-Time Faculty

(Only to be used when MOU authorizing payment for part-time faculty is in effect.)

Employee Name: _____ EIN: _____

Course Title: _____

Date(s) Worked: _____

Description of Work: _____

Total Hours (**MAX COMPENSATION IS 2 HOURS**): _____

_____

Part-Time Faculty Date

_____ _____

Division Dean Date Vice President – Office of Instruction Date

Please remit form to Hourly Faculty Technician in the Human Resources office after signatures are obtained.

6/17/14 vc