*Please type in the gray fields. Please note: if faculty member’s work changes significantly, a revised workload must be completed, signed, and copied to the Provost’s Office.*

Academic Year: Click here to enter text. Date: Click here to enter a date. Revised: Click here to enter a date.

Term: Fall Spring

Name: Click here to enter text. Rank, Discipline: Click here to enter text.

(e.g., Associate Professor of Chemistry)

Campus/Unit: Click here to enter text. Program/Department: Click here to enter text.

**WORKLOAD TYPE**: Bipartite Academic Bipartite Vocational Tripartite Academic

***Teaching Component***

1. Instruction in regular academic courses (Note the semester for each course)

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| --- | --- | --- | --- | --- |
| **Fall Semester** | **Course #** | **Title** | | **Credits** |
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| **Semester Total** |  |

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| --- | --- | --- | --- | --- |
| **Spring Semester** | **Course #** | **Title** | | **Credits** |
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| **Semester Total** |  |

Academic Year Teaching Component Workload Parts: **Click here to enter text.**

***Service Component***

FALL:

College/Department:

Click here to enter text.

Public/Community:

Click here to enter text.

University:

Click here to enter text.

Professional:

Click here to enter text.

Fall Semester Total Click here to enter text.

SPRING:

College/Department:

Click here to enter text.

Public/Community:

Click here to enter text.

University:

Click here to enter text.

Professional:

Click here to enter text.

Spring Semester Total Click here to enter text.

Academic Year Service Component Workload Parts **Click here to enter text.**:

***Creative/ Research/Scholarship Activity Component***

FALL: *Extramurally funded (source, problem topic or activity and percent of teaching time to be bought out)*

Click here to enter text.

FALL: *University (problem/topic/activity)*

Click here to enter text.

SPRING: *Extramurally funded (source, problem topic or activity and percent of teaching time to be bought out)*

Click here to enter text.

SPRING: *University (problem/topic/activity)*

Click here to enter text.

Academic Year Research/Creative Activity Workload Parts **Click here to enter text.**

***Administrative*** (program director, program development, curriculum development, etc.)

Click here to enter text.

Academic Year Administrative Workload Parts **Click here to enter text.**

***Other Expectations or Plans*** (sabbatical, special leave, professional development, etc.) **(Only if applicable)**

Click here to enter text.

Is an overload assignment anticipated? **Yes No**

If ***yes***, please define and explain:

Click here to enter text.

**Total Annual Workload** Click here to enter text.

The total annual faculty workload **should total 5 parts**

**Signatures:**

Faculty Member’s Signature Date

Director/Chair’s Signature Date

Dean’s Signature Date

*Procedures for workloads are outlined in Article 5 of the collective bargaining agreement between the University of Alaska and University of Alaska Federation of Teachers.*