RHE FACULTY COURSE RELEASE PROGRAM APPLICATION FORM

**NAME OF APPLICANT**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

YEAR OF EMPLOYMENT: \_\_\_\_\_\_\_\_\_\_\_\_

STATUS: \_\_\_\_\_Asst. Prof. \_\_\_\_\_ Assoc. Prof. \_\_\_\_\_\_ Prof.

TENURE STATUS: \_\_\_\_Tenured \_\_\_\_\_ Untenured

CAMPUS ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

RELEASE TYPE: ­­­ \_\_\_\_\_ New Probationary Faculty \_\_\_\_\_ Post Tenure Course Release

**SEMESTER REQUESTED FOR RELEASE**

 \_\_\_\_\_ Fall \_\_\_\_\_ Spring Fiscal Year: \_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_ Fall \_\_\_\_\_ Spring Fiscal Year: \_\_\_\_\_\_\_\_\_\_\_\_

**Choose one and list courses:**

\_\_\_\_\_ COURSES REQUESTED FOR RELEASE  \_\_\_\_\_PROJECTED COURSE LOAD

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PREVIOUS COURSE RELEASE RECEIVED**

\_\_\_\_ Fall \_\_\_\_ Spring Fiscal Year: \_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_ Fall \_\_\_\_ Spring Fiscal Year: \_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_ Fall \_\_\_\_ Spring Fiscal Year: \_\_\_\_\_\_\_\_\_\_\_\_

**BRIEF DESCRIPTION OF COURSE RELEASE ACTIVITIES:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| Applicant’s Signature | Academic Division Coordinator Signature |
| Signature |  | Signature |  |
| Name |  | Name |  |
| Dept/School |  | Unit |  |
| Date |  | Date |  |
| Associate Dean’s Signature | Dean’s Signature |
| Signature |  | Signature |  |
| Name |  | Name |  |
| Campus |  | Campus |  |
| Date |  | Date |  |