

ADJUNCT APPOINTMENT

RECOMMENDATION for INITIAL APPOINTMENT, REACTIVATION or TITLE UPDATE of ADJUNCT INSTRUCTIONAL STAFF

Please email completed form to Dean's Office and submit a CV or résumé for all New Hires, Rehires, and Title Changes

SEMESTER:			2	20					
Please select:	NEW HI	RE REI	HIRE S	SECOND	TITLI	E SE	COND DEPT.	Т	ITLE CHANGE
<u>LEGAL</u> NAME OF CANDIDATE: (LAST NAME)							FIRST NAME)		
STREET ADDRI	ESS:								
CITY:						STATE:	Z	IP:	
PHONE:			EMAI	IL:					
DEPARTMENT/	PROGRAM:								
RANK/TITLE*: SALARY/HOUR*:									
*Rank/Title & Salary I	both start at the mi	nimum level uni	ess authorized by	the Provos	t. Req	uest for an exem _l	ption must be accor	mpanied by	written justification.
OFFICE/LOCATION	ON:					NYCCT PHO	NE:		
If yes, ple		candidate's E	MPL (CUNYfirs				nt?		
ANTICIPATED ASSIGNMENT					ANTICIPATED ASSIGNMENT				
Course	Section	Workload Hours	Semester Ho Workload HRS X # of			Job D	escription		Total Semester Hours
TOTAL TEACHII	NG Hours								
PROFESSIONAL/OFFICE HOURS *						Fall: 225.00 - W	Semester Lin inter: 75.00 - Spring:		mmer: 175.00
TOTAL HOURS									
							in the shaded cell 90.00 - 134.75		
PROFESSIONAL AN			STER HOURS, TEACHING NO. OF WORKLOAD HOURS			1.00	2.00	3.00 +	
	OFFICE HOURS	ID/ OIL		0.00 2.00		15.00	30.00	45.00	1

Chairpersons recommending a new adjunct instructional staff member needing an employment letter related to immigration status and ability to work should reach out directly to the Director of OFSR for next steps.

This is to certify that we have interviewed the candidate noted above, checked references and hereby recommend the appointment.

Signature of Chairperson/Program Coordinator

The following pages contain two versions of an initial appointment letter for new adjunct faculty and CLTs.

The letters are completed and issued by the *Adjunct Workload Management Office*.

Please do not attempt to change the letters or data in any way.

Please do not send the letters to your candidate. AWMO will copy the Academic or Administrative Department when the letter is sent.

Thank you.



Dear	
We are pleased to inform you that	t the New York City College of Technology intends to appoint
you in the title of	
for the	20 academic semester. The appointment will be for
contact hours per week	, with up to an additional ——— hours per week for the
provision of office hours (if applic	eable), at the hourly rate of
hiring paperwork, verifications,	conditional, contingent upon satisfactory completion of all including but not limited to, confirmation of identity and mic and professional credentials, and necessary employment and
	load hours are subject to sufficiency of registration, changes in Contractual workload limitations apply.
Please indicate your acceptance or ISR@citytech.cuny.edu	declination of this offer below and return by email to
Rus Hotzlen.	
Russell K. Hotzler, President	
I accept:	Date
I decline to accept:	Date



Dear	
We are pleased to inform you that the New You you in the title of	rk City College of Technology intends to appoint
in the Department of	
	mic semester. The appointment will be for
paperwork, verifications, including but not limit	ngent upon satisfactory completion of all hiring ited to, confirmation of identity and employment atials, and necessary employment and background
Appointments and assigned workload hours are curriculum and financial ability. Contractual wo	subject to sufficiency of registration, changes in orkload limitations apply.
Please indicate your acceptance or declination of ISR@citytech.cuny.edu	f this offer below and return by email to
Rue Hotzlen.	
Russell K. Hotzler, President	
I accept:	Date
I decline to accept:	Date