

Office of Human Resources

Annual Contracted Faculty Renewal Of Annual Appointment

ACF Member: _____

Cougar ID #: _____

Department: _____

General Ledger Account #: _____

Original Appointment Year: _____

Renewal for Academic Year: _____

AUTHORIZATION: I approve the above named employee for renewal of an annual appointment as an ACF

*Department Head / Chair: _____ Date: _____

Questions?? - Please contact Michele Arnold at extension 5844