

Mount Allison University

Part-Time Faculty Recruitment Authorization

POSITION AUTHORIZATION

Date:

Department:		Course Name:		
Course Number:	Class Size:		Contact Hours/wk	
Term:	Fall	Winter	Fall & Winter	Other
Stipend:	3 credit	6 credit	3 credit plus lab	Other (Please specify):
External Advertising Requirements (if applicable):				
Justification for Funds:				
Replacement Details (if applicable):				
APPROVALS: (Note: A copy of the posting must be attached)				
_____	_____		_____	
Dean	Budget Manager		Vice-President (Academic & Research)	

	Salary Account Number			

APPOINTMENT AUTHORIZATION

Date:

Recommended Candidate:					Start Date:	
Teaching Schedule:	M	T	W	T	F	Class Start Time:
Lab Schedule (if applicable):	M	T	W	T	F	Lab Start Time:
Travel Allowance (minimum 50 km one way):	Yes	No	Departure Point:			
APPROVALS: (Note: A resume must be attached for new hires)						
_____	_____					
Dean	Human Resources					