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| **CUESTA COLLEGE**  **REQUEST FOR UNPAID WORKLOAD EXCHANGE**  **ACADEMIC STAFF** | | | | | | | | | | | | | | |
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| Employee Name: |  | | | |  | Soc. Sec. # | | | |  | | | | |
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| 1. To be eligible for an unpaid workload exchange, the employee must be on an approved list of faculty members that have agreed to be involved in an exchange (maintained by each Dean/Director). 2. Request for an exchange shall be submitted to the Dean or Director in writing **AT LEAST ONE WEEK** in advance, except in the case of an emergency or unforeseen situation. | | | | | | | | | | | | | | |
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| **DATE(S) OF EXCHANGE**  **REQUESTED BY INITIATING FACULTY MEMBER** | | | | **CLASS MEETING TIME** | | | | **CLASS OR ASSIGNMENT**  **TO BE EXCHANGED** | | | | | | |
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| **DATE(S) OF EXCHANGE**  **REQUESTED BY EXCHANGE FACULTY MEMBER** | | | | **CLASS MEETING TIME** | | | | **CLASS OR ASSIGNMENT**  **TO BE EXCHANGED** | | | | | | |
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| An unpaid workload exchange may be allowed for: (1) conference attendance related to the performance of the initiating faculty member’s instructional or service assignment; (2) College-related activities that are a part of the faculty member’s assigned work responsibilities, such as interviews, committee meetings, and articulation activities; and (3) other approved activities relating to the improvement of the College, its programs, or services. In addition, an unpaid workload exchange may be allowed for an emergency or unforeseen situation that would result in the cancellation of a class.  An unpaid workload exchange may not be used for personal business, pleasure, or to extend a recess or vacation period.  **All exchanges are made on an hour-for-hour basis and must be completed within the same academic year. An exchange that is not completed within the academic year shall not carry over to the subsequent year.**  Each faculty member may utilize **up to two exchanges per academic year**. The total number of days per employee is limited to **four full or partial days per academic year in each circumstance**. (Reference Article 6.20) | | | | | | | | | | | | | | |
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| Requesting Faculty Signature: | |  | | | | | | |  | | Date: | |  | |
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| Exchange Faculty Signature: | |  | | | | | | |  | | Date: | |  | |
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| **Faculty member's minimum qualifications for the subject area(s) to be exchanged verified?** | | | | | | | | | | | | | | **Yes No** |
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| Dean's or Director's Verification of Minimum Qualifications and Approval: | | |  | | | | | | | | Date: |  | | |
|  | | | Dean or Director | | | |  | | | | | | | |
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| **A copy of the approved request must be provided to the Division Chair and the Vice President.** (revised 11/13/03) | | | | | | | | | | | | | | |