



DIVISION OF ACADEMIC AFFAIRS
OFFICE OF FACULTY AFFAIRS & DEVELOPMENT
 1000 EAST VICTORIA STREET, WH B-368
 CARSON, CALIFORNIA 90747
PHONE: (310) 243-3766

ASSIGNED TIME FOR EXCEPTIONAL LEVELS OF SERVICE TO STUDENTS AWARD APPLICATION - ACADEMIC YEAR 2022-2023

All applicants are responsible for securing signatures from their department chair/program coordinator (or equivalent administrator) and Dean (or equivalent administrator). Please note this application must be submitted along with the required supporting documents via Interfolio to the Office of Faculty Affairs and Development no later than **Monday, April 4, 2022 (incomplete applications will not be considered)**.

Name: _____ Title: _____
 Department/Program: _____ College: _____
 E-mail: _____ Assigned Time for: _____

INSTRUCTIONS: Please include the following documents and submit via Interfolio:

- a. A 500-word narrative explaining the activity you propose will improve student’s learning experiences beyond your standard professional responsibilities; in particular, please highlight activities as they (per CBA Article 20.37) “support underserved, first-generation, and/or underrepresented students and other practices in support of such students, including those caused by cultural taxation. This support includes but is not limited to: the development and implementation of high-impact educational practices; curricular redesign intended to improve student access and success; service to the department, college, university, or community that goes significantly beyond the normal expectations of all faculty; assignment to courses where increases to enrollment have demonstrably increased workload; and other extraordinary forms of service to students.”
- b. Include an approximation of the hours your activity will take during the semester and if additional time outside of the semester is needed.
- c. A current CV (two-page maximum)
- d. A brief letter of support from a CSUDH employee (other than the applicant) regarding the value and potential outcome of the activity;
- e. Signatures from your College Dean and Department Chair/Program Coordinator (or equivalent administrator) indicating they are aware of the proposal and are not currently providing assigned time for the same general activity.

SIGNATURES:

Department Chair/Program Coordinator
 (or equivalent administrator) Signature: _____ Date: _____

Dean’s (or equivalent administrator) Signature: _____ Date: _____