

Teaching Assignment Application for Staff/Manager

Employee's Information:		
Name:	Kean ID:	
Department:	Extension:	
Work Hours:	 Email:	
Semester:	Course Credits:	
List of Course(s) and Meeting Days/T		
Course	Meeting Days	Times
current resume/CV and most recent Employee's Signature:		Date:
My signature confirms that this emp		bove teaching does not
conflict with the employee's primary	y job responsibilities.	
Supervisor/Director's Signature	e:	Date:
		Data
Division VP's Signature	e:	Date:
Approved		
 Denied		
		Date:
Signature: Provost and VP of	f Research and Faculty	