Special Session Course Proposal Form

Special Session classes are offered in self-support degree and certificate programs. These classes are not open to traditionally-enrolled University students.

This form was sent by: _____

EPaCE- Program Coordinator Review

Program Name: _____

Term Code: _____ Program Fee: _____

Chartstring: _____

Item Types: _____ _____ _____

Position Number: _____ Salary: _____

Course: _____ Course Title: _____ Units: _____

Dates: _____ _____ Projected Enrollment: _____ Class Type: _____

Start Date: End Date:

Instructor Information:

Last Name: _____ First Name: _____ Poly EmplID: _____

Phone Number: _____ Email Address: _____ Instructor Rank: _____

Campus Department: _____

1) What is your CURRENT faculty employment status at Cal Poly? ○ New Hire ○ Full-Time Faculty ○ Part-Time Faculty

1a) Part-Time Faculty - will you be separated from the University for more than one year before this assignment begins? ☐ N/A ☐ No ☐ Yes

2) Will this class be team taught? (if yes, second instructor should submit a SEPARATE proposal form with their information) ○ No ○ Yes

3) Will you receive additional pay/overload — other than CGE assignments — applicable to the 125% limit while teaching this class?) ○ No ○ Yes

4) Will you be on leave/sabbatical for any portion of this assignment? ○ No ○ Yes

5) Will you be on the Faculty Early Retirement Program (FERP) for any portion of this assignment? ○ No ○ Yes

6) If you are a recent retiree, will this assignment begin at least 6 months after your retirement date? ○ N/A ○ No ○ Yes

7) Is this a volunteer assignment? ○ No ○ Yes

I voluntarily request a teaching appointment in the Extended, Professional and Continuing Education and understand that this appointment is considered "overload" and unaffiliated with State work assignments.

Instructor: _____ Date: _____ Chair: _____ Date: _____

Approved By: _____ Date: _____

Academic Personnel

EPaCE - Program Coordinator Review

Notes/Corrections: _____

Enroll/Deadline: _____ Census Date: _____ Refund Deadlines - 100% _____ 65% _____

Class notes: _____ Program Coordinator Approval: _____ Date: _____

Additional Information:

Please add any other information or notes regarding this course proposal, or attach a separate document:

CAL POLY
Extended, Professional & Continuing Education