

Split Class Assignment Agreement Form

Instructor Name: _____

Co-Instructor Name: _____

Course Name: _____

Course ID (CID) Number: _____

Semester/Year: _____

Course Equated Hours: _____

Portion of Course to be Assigned to Instructor (as a percentage of the equated hours):

I hereby agree to split the course named above and understand that:

- I will receive a load and commensurate pay associated with the percentage of the total course equated hours.
- My semester load will only include the percentage of total course equated hours for this class.
- I am not required to accept a split assignment and the offer of a split assignment shall not constitute the contractually obligated offer of assignment or any part thereof.
- The acceptance or refusal of any split class assignment shall have no bearing on my current/future offers of assignments.
- I will work jointly with my co-instructor(s) to provide an annotated syllabus delineating grading, course content, and dates for teaching to the Office of Instruction by the end of
- the first week of classes.