Date

Faculty Name

Campus Address

Department/School

Dear Faculty Name,

This letter is to confirm your teaching assignment for \_\_\_\_\_\_ semester, 20\_\_. Your teaching load includes release time. Your responsibilities for this assignment will include:

* List release time assignment duties, expectations, desired outcomes here

This release-time assignment will conclude on <date>.

During the term of this appointment, your full load will consist of the following assignments:

* \_\_-credit release from instruction as described above;
* XXXX 100, title of course, meeting days/times, etc.;
* XXXX 200, title of course, meeting days/times, etc.; and,
* XXXX 300, title of course, meeting days/times, etc.

The above represents how you will achieve your contractual twelve (12) credit workload for the period of the assignment described above.

I appreciate your willingness to provide this service to the <department, college, other>. If the terms of the assignment are acceptable to you, please sign and return one copy of this letter as soon as possible. This will indicate your official acceptance of the release-time assignment.

Sincerely,

DH/SD Name

Department/School

cc: Dean

 Academic Human Resources

*I accept the assignment as described above.*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date