

ADJUNCT FACULTY APPROVAL FORM

Program Seeking Approval: _____

Legal Name of Faculty: _____

A#: _____

It is hereby requested that the above-named person be approved to serve as a faculty member for Vincennes University to teach the following courses:

COMPLETION OF THIS FORM IS NOT CONFIRMATION OF EMPLOYMENT AT VU. A PAYROLL NOTIFICATION MUST BE COMPLETED BEFORE TEACHING AT VU.

Psychology

Requested	Approved	Denied	Course #	Course Name
			PSYC-102	Identity and Experience: Exploring Values and Careers
			PSYC-141	Applied Psychology
			PSYC-142	General Psychology
			PSYC-201	Developmental Psychology
			PSYC-204	Introduction to Research Methods in Psychology
			PSYC-213	Mental Aspects of Sport Performance
			PSYC-218	Psychology of Childhood and Adolescence
			PSYC-240	Human Sexuality
			PSYC-242	Psychology of Education and Learning
			PSYC-249	Abnormal Psychology
			PSYC-250	Behavioral and Emotional Disorders in Childhood and Adolescence
			PSYC-251	Fundamentals of Assistive Technology
			PSYC-253	Introduction to Social Psychology
			PSYC-280	Health Psychology
			PSYC-291	Introduction to Disabilities
			PSYC-301	Human Issues and Dilemmas in Social Sciences
			PSYC-187	Special Instruction***
			PSYC-188	Special Instruction***
			PSYC-189	Special Instruction***
			PSYC-297	Special Project***
			PSYC-298	Special Project***
			PSYC-299	Special Project***

**A subtitle is required for all Special Instruction/Project courses --
Please write the requested subtitle in following the *** on the appropriate course line**

Updated for 2023-24 Academic Year

REVIEWED BY:

Non-Vincennes Campus

Vincennes Campus

Department Chair/Program Chair Date

Department Chair/Program Chair Date

Director/College Dean Date

College Dean Date

Vice President Date

Provost Date

NOTES:

