

Minnesota State University, Mankato
2009-2010 Adjunct Appointment Authorization

Name _____ College _____

Department _____ Date _____

Primary Work Location* _____

Semester of Class _____

Course Number _____ Course Name _____

** Primary Work Location is assumed to be the Mankato campus unless otherwise specified.*

Adjunct appointments are made according to the following principles. Check those that apply to this hire.

- To meet temporary staffing needs due to enrollment increases for which normal full funding is not provided.
- When less than full time replacement is provided to a department for faculty who are reassigned to other duties or who are on sabbatical or on other leaves of absence.
- To teach courses requiring special expertise and/or to meet special programmatic needs of departments where such expertise and needs cannot otherwise be provided for within the resources of the department.

Qualifications -- An adjunct will have a master's degree, specialized licensure or other special preparation or experience. Please check educational level of adjunct:

- Doctorate
- Masters
- Below Masters: Explain

Chair Signature _____ Dean Signature _____

Date _____ Date _____

Please attach this form to the UPD