## **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. **Emergency Management**

Requested	Approved (Initial)	Denied (Initial)	Course #	Course Name	
			EMAP-100	Principles of Emergency Management	
			EMAP-130	Incident Management Systems	
			EMAP-160	Emergency Preparedness and Planning	
			EMAP-180	Weapons of Mass Destruction	
			EMAP-205	Responding to Terrorism Incidents	
			EMAP-215	Emergency Exercise and Design	
			EMAP-230	Emergency Operations Center (EOC) Management	
			EMAP-230L	Emergency Operations Center (EOC) Management Lab	
			EMAP-187	Special Instruction***	
			EMAP-188	Special Instruction***	
			EMAP-189	Special Instruction***	
			EMAP-297	Special Project***	
			EMAP-298	Special Project***	
			EMAP-299	Special Project***	
	A	subtitle is requir	ed for all Specia	I Instruction/Project courses	

Please write the requested subtitle in following the \*\*\* on the appropriate course line

**Updated for 2023-24 Academic Year** 

## **PEVIEWED RV**

REVIEWED BY.							
Non-Vincennes Camp	ous	Vincennes Campus					
Department/Program Chair	Date	Department/Program Chair	Date				
Director/College Dean	Date	College Dean	Date				
Vice President	Date	Provost	Date				
NOTES:							