

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.**

Architectural Studies Technology/CAD

Requested	Approved (Initial)	Denied (Initial)	Course #	Course Name
			ARCH-102	Architectural Drafting and Print Reading
			ARCH-110	Fundamentals of Architectural Drawing
			ARCH-141	Introduction to Architectural CAD
			ARCH-160	Architectural Working Drawing
			ARCH-161	Architectural Computer-Aided Drawing
			ARCH-221	Advanced Architectural Software
			ARCH-231	Architectural Rendering and Illustration
			ARCH-241	Intermediate Architectural CAD
			ARCH-273	Building Information Model
			ARCH-281	Advanced Design I
			ARCH-282	Advanced Design II
			ARCH-291	Advanced Architectural CAD
			ARCH-187	Special Instruction***
			ARCH-188	Special Instruction***
			ARCH-189	Special Instruction***
			ARCH-297	Special Project***
			ARCH-298	Special Project***
			ARCH-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:
