CONTRACT TEACHING AGREEMENT

TEACHER INFO

Contract Teacher Name: _____ ID#: _____ SSN: _____

Email Address : _____ Degree Earned: _____

Address: _____

Home Phone: _____ Cell Phone: _____

Employer: _____ Current Position: _____

☐ Bi-weekly Payments ☐ One Payment at the End of the Contract

DEPT INFO

Class starts on: _____ and ends on: _____

Course #	Section	Course Title	Credit Units	Load Units	Time	Days
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

Comments or special arrangements:

WAGE INFO

Rate per unit: _____ ☐ Faculty ☐ Adjunct Level: _____ Step: _____

Total Amount: _____ # of Students: _____

ACCOUNT NUMBER _____ - _____ - _____ %_____ _____ _____

FUND ORG ACCT # Percentage Department Effective Date

ACCOUNT NUMBER _____ - _____ - _____ %_____ _____ _____

FUND ORG ACCT # Percentage Department Effective Date

TERMS OF AGREEMENT

1. Payments will be made biweekly beginning with the payroll period following receipt by the Human Resources Office of the approved contract. NO PAYMENT WILL BE MADE PRIOR TO ENROLLMENT VERIFICATION.
2. It is understood and agreed that the contract teacher is entitled to no benefits other than the cash amount designated above.
3. Course grades are due at 2:00p.m. on the Tuesday following final examination week. The final pay check may be held until the grades are turned in at the registrar's office.
4. This contract may be cancelled by the university if the class or activity described herein does not fill (acceptable class size will be determined by the university) or if it can be taught by a full-time faculty member whose classes do not fill.
5. Policies and procedures as described in section II of the La Sierra University Faculty Handbook, and as mentioned or amended by subsequent revisions thereof, are expressly incorporated and made a part of the terms of this agreement. Where said policies and procedures are in conflict with the express terms of this agreement, the terms of this agreement shall control.
6. For terms pertaining to online teaching, see comment box above.

SIGNATURES

_____ _____ _____ _____ _____ _____

Date Department Chair Signature Date Dean of School Signature Date Contract Teacher Signature

Rates are not final until the agreement is signed by the Dean of the School.

HR

Position: _____ Code: _____

FTE: _____ Appt. %: _____ Hours per day: _____ Hours per Pay Period: _____ # of payments: _____

Amount of each payment: $ _____

Start Date: _____ Payroll Begin Date: _____Terminate after Payroll of: _____

Processed by: _____

☐ B ☐ H ☐ P ☐ E