

CHANGES IN RELEASED TIME ASSIGNMENT

Department

Faculty Name	SSN	Released Time (Hrs.)	Released Time (Year)	FOAPALB #	-----Semester----- Currently Assigned	Change To:
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Chairperson's Signature: _____ Date

Dean's Signature: _____ Date:

Provost's Signature _____ Date:

*****This form is to be completed and returned to the Dean's Office for forwarding to the Provost's Office.***

(crrta 12/04/03)