

**APPENDIX C: SUMMER TEACHING ASSIGNMENT JOLIET JUNIOR COLLEGE
APPLICATION FOR ADJUNCT TEACHING ASSIGNMENT**

Summer 20 ____

Name _____
 Address _____
 City _____ State ____ Zip _____
 Phone (home) _____
 Phone (cell) _____
 Phone (work) _____
 E-mail (JJC/Alternate) _____

Seniority Level	
(based on semesters you have been teaching at JJC)	
<input type="checkbox"/>	Level 4 (22 or more)
<input type="checkbox"/>	Level 3 (13-21)
<input type="checkbox"/>	Level 2 (5-12)
<input type="checkbox"/>	Level 1 (1-4)

I would like to teach courses totaling at least contact hours.

I will be available and prefer an assignment during:

<input type="checkbox"/> Morning	<input type="checkbox"/> M	<input type="checkbox"/> T	<input type="checkbox"/> W	<input type="checkbox"/> R	<input type="checkbox"/> F	<input type="checkbox"/> SA
<input type="checkbox"/> Afternoon	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Evng (after 4pm)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Preferred Modality	
rank in order of preference	
<input type="checkbox"/>	Face-to-Face
<input type="checkbox"/>	Online
<input type="checkbox"/>	Hybrid

<input type="checkbox"/>	Sum I: 1st 6-wks
<input type="checkbox"/>	Sum II: 2nd 6-wks
<input type="checkbox"/>	Sum III: 8-wks
<input type="checkbox"/>	Sum IV: 12-wks
<input type="checkbox"/>	Sum V: 4-wks

I would prefer (if choosing more than one, rank in order of preference)

<input type="checkbox"/> Main Campus	<input type="checkbox"/> Romeoville Campus
<input type="checkbox"/> Frankfort Education Center	<input type="checkbox"/> Morris Education Center
<input type="checkbox"/> City Center Campus	<input type="checkbox"/> Weitendorf Agricultural Education Center
<input type="checkbox"/> Braidwood (Reed-Custer HS)	Other <input type="text"/>

I am qualified and would be willing to teach the following courses (in order of preference)

1. <input type="text"/>	4. <input type="text"/>
2. <input type="text"/>	5. <input type="text"/>
3. <input type="text"/>	6. <input type="text"/>

Please submit this form to your Department Chair or Manager, cc your Department Secretary.
 For Summer assignments: on or before **February 1st** in the previous Spring semester.

Other comments (including requests for other sessions not listed above):