

Staff Development Individualized Flex Activities Agreement

Instructions

For each individual activity, complete the information on the top half of the page and return the form by the required date to your dean. Once you have completed this activity, complete the bottom half of the form and return it to your dean. Attach documentation if appropriate.

NOTE: Both this form and the Staff Development Flex Agreement Form are required for individual activities.

Name _____ Fall Spring _____ Year

Dept/Div _____

Activity _____ Total Hours _____

Date(s) of Activity _____ (one day = 4 hours)

1. Describe the activity in reasonable detail.

2. How will this activity benefit you, your students, and/or the college?

Dean Signature _____ Date _____

Report of Completion

3. Describe the activity in reasonable detail.

4. How will this activity benefit you, your students, and/or the college?

Faculty Signature _____
Dean Signature _____ Date _____