APPENDIX B-5

CUESTA COLLEGE
STUDENT LEARNING OUTCOMES AND ASSESSMENT
PAY TIMESHEET

(Please Print or Type at! information)

Name: Banner ID #

(Last) (First)

Please indicate semester worked:

C] Fall ____ (year) (Paid on December 31 payroll)

Spring ____ (year) (Paid on May 31 payroll)

In accordance with the District/CCFT Collective Bargaining Agreement, Article Section 4.17 — by signing this request below, I affirm that I have met the standard for requesting pay for the on-going process of developing and assessing student learning outcomes as determined by my division. I am requesting the hours of pay listed below based on my current semester load as checked below. (Formula below)

Temporary Faculty Load up to 19.9% = .5 hours per semester
Temporary Faculty Load up to 20% - 39.9% = 1.0 hours per semester
Temporary Faculty Load up to 39.9% - 67% = 1.5 hours per semester

Employee Signature Date

Dean of Instruction/Director Date Division Chair Date

PAYROLL OFFICE USE:		
	$52.04	$
Total Hours	D-07, Lab Rate	Total Payment

Please add the "Program" Account Number to the account string below for your Division/Department:

Account String:1100-3003-1122-