

4. Why Overload is Needed:

I agree that this work will conform and be subject to all MSU Board of Trustees Policies, including the policies on Overload Pay. I further agree I have read and will adhere to the Overload Pay policy. The information provided on this form is accurate and that I will immediately advise my direct supervisor of any subsequent change which makes any of the information inaccurate.

Employee Signature

Date

I have reviewed the request for overload and on the basis of the information provided, the proposed overload:

- Will not interfere with the faculty members' primary work assignment and does not pose a conflict of interest or commitment to the faculty member's primary work assignment
- Is above 100% full-time FTE.
- Will not hamper the faculty member's progress towards promotion (i.e., tenure or continuing status).
- Does not violate any contractual (collective bargaining or otherwise) agreements.
- The faculty member has not currently been given a course release

Primary Chairperson/Director Signature Date

Second Chairperson/Director Signature Date

Other Chairperson/Director Signature Date

Primary Dean/Adm. Head Signature Date

Second Dean/Adm. Head Signature Date

Other Dean/Adm. Head Signature Date