



3. Description of Overload Work:

4. Why Overload is Needed:

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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.

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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

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Primary Chairperson/Director Signature

Date

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Second Chairperson/Director Signature

Date

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Other Chairperson/Director Signature

Date

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Primary Dean/Adm. Head Signature

Date

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Second Dean/Adm. Head Signature

Date

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Other Dean/Adm. Head Signature

Date

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Dean or Dean's Designee Signature

Date