

APPENDIX F

RELEASE TIME FORM

Name		ID#	
Department		Cost Center	

applies for/is assigned to release time for Semester: _____

Load Points	Credit Hours	Contact Hours Per Week	# of Weeks	Class Code

for the purpose of _____

upon the following conditions _____

Faculty Member

Date

Immediate Supervisor

Date

Dean

Date

Note: If release time is awarded for any items covered in 6.06, an IPA must be completed and attached.

Note: According to Florida Statutes, the release time request is not complete until approved by the President.