

FACULTY COURSE RELEASE OR CREDIT HOUR RELEASE TIME FORM

This form is to be used when full-time faculty are released from their regularly assigned courses or other duties so that they may perform grant-related work and should be submitted prior to the period for which released time is requested. This form is **NOT** to be used for faculty compensation during the summer. A faculty summer contract is needed for that purpose.

University Grant Account Number	Fund Dept. Progran	m Grant ID	
Cmongon	Tunu Dept. Trogram	- Grani ID	
Sponsor			
Name		CSU	
Grant Position		Course or Credit Hour Release	?
Time Period (semester or dates)		Nui	nber of Credits for Release
Dollar Amount		. to be credited where released is paid from	
o be completed by Chair	:		
If released from a cours	se, was someone hired as a replacemen	t? Yes No	
	_		
If yes, name of replacer	ment:		
Course No.	Section No.	Amount Paid	
Replacement was charg	ged to Combo Code.		
	te: Your signature below authorizes a l		ne to the appropriate part-time
ersonnel line in the amoun	t indicated above to cover the cost of t	he replacement.	
,			
Name	(please TYPE or PRINT legibly)	Signature	Date
	Submit this form to CDDC	IOURNALS@CSUOHIO.edu	
	Suoma inis jorm to SPKS.	OCIL WILLS COSC OTHORCUM	
Name	(please TYPE or PRINT legibly)	Signature	Date
Name epartment hair/Director	(please TYPE or PRINT legibly)	Signature	
Name epartment hair/Director Name ollege/School			Date Date
epartment hair/Director Name ollege/School ean	(please TYPE or PRINT legibly)	Signature	