

Voluntary FTE Change Request Form

Changes in FTE for faculty appointments must be submitted for approval through the appropriate administrative channels and approved by the Associate Provost for Academic and Faculty Affairs prior to any FTE change.

First Name:

Last Name:

Job Title:

UFID:

Position Number:

College:

Department:

Contact Person:

Phone Number:

Justification for FTE Change

The justification must include the impact to the department and must describe the proportionate adjustments in the faculty member's assigned duties needed as a result of the FTE change.

Information for Employee

This is to confirm your voluntary change in full-time equivalency (FTE) from FTE to FTE at the University of Florida, effective as of

As a result of your FTE change, your typical work hours will be:

Monday – Friday, AM to PM.

Your prorated annual salary will be \$

For tenure accruing positions, this action may impact your tenure and promotion process. For additional information regarding the tenure and promotion process, please contact the UFHR Faculty Relations Department at opt@admin.ufl.edu.

For information regarding the impact this change may have on your leave accrual, please contact UFHR Leave at central-leave@ufl.edu or by phone at (352) 392-2477.

