



Columbia Law School

Instructional Appointment Authorization Form Officers of Administration and the Libraries

EMPLOYEE INFORMATION

Employee Name: _____ UNI: _____

Administrative Department: _____

Employee Title: _____ Full Time: _____ Part Time: _____

The Officer identified above has been invited to teach a course at Columbia Law School.

COURSE INFORMATION

Course Name: _____

Course #: _____ Total # of Points: _____

Appointment Dates: _____ to _____

When is this course being taught: M T W R F At what time: _____

Compensation: _____

VERIFICATION OF TEACHING ELIGIBILITY

Note: You may attach emails or letters of approvals to this form. It is your responsibility to complete this form in its entirety and secure all approvals. Failure to obtain the necessary approvals will prevent your appointment. Please retain a copy of the signed form for your files.

Approvals:

1. Vice Dean/Chair of Adjunct Appts Committee (print name): _____

Signature: _____ Date: _____

2. Employee's Supervisor (print name): _____

Signature: _____ Date: _____

3. Chief Financial and Strategy Officer (print name): _____

Signature: _____ Date: _____

4. Associate Dean (print name): _____

Signature: _____ Date: _____

For Columbia Law School Human Resources Use only:

Provost's Office: Signature certifies Provost Office approval

Print Name: _____

Signature: _____ Date: _____