



# Educational Experience Enhancement Award

Academic Year 2020-2021

The Collective Bargaining Agreement (CBA) between the California Faculty Association and the Board of Trustees of the California State University designates the awarding of assigned time (in the form of Weighted Teaching Units, WTU) to unit 3 faculty employees “who are engaged in exceptional levels of service that support the CSU’s priorities, but who are not otherwise receiving an adjustment in workload to reflect their effort. Awards are designated for work load beyond the requirements of regular faculty assignment in enhancing the student learning environment.

- Complete applications are **due to Laurel Holmstrom-Keyes (holmstrl@sonoma.edu) by October 5, 2020 for Spring release.**
- The Faculty Standards and Affairs Committee (FSAC) will be solely responsible for evaluation of applications and making recommendations of awards to the Office of Faculty Affairs.
- Applicants will be notified of awards no later than October 30th.

### TO BE COMPLETED BY FACULTY MEMBER

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
 Department: \_\_\_\_\_ School: \_\_\_\_\_  
 Email: \_\_\_\_\_

A) Attach to this application a <b>1-page narrative</b> which 1) explains the specific activity for which additional workload is needed; 2) How the activity will improve students’ learning experiences; 3) Why this work is beyond your standard professional responsibilities for which you receive 3 units of service; and 4) Clearly state whether or not you have received this award in the past.
B) Provide the approximate number of hours during the semester this additional activity will take to complete. _____ hours per semester
C) Semester activity will occur Spring 2021.

Faculty Member’s Signature \_\_\_\_\_ Date: \_\_\_\_\_  
*Forward to Department Chair*

### Required Signatures:

### TO BE COMPLETED BY DEPARTMENT CHAIR

Signature \_\_\_\_\_ Date: \_\_\_\_\_  
*Forward to Dean*

### TO BE COMPLETED BY DEAN

Signature \_\_\_\_\_ Date: \_\_\_\_\_  
*Forward to Faculty Affairs*

### TO BE COMPLETED BY ASSOCIATE VICE PRESIDENT FOR FACULTY AFFAIRS

Signature \_\_\_\_\_ Date: \_\_\_\_\_