



DIVISION OF ARTS HUMANITES COURSE BUYOUT PROGRAM (CBO)

Date: _____ Name: _____

Dept: _____ Employee Number: _____

Department Contact: _____ Signature: _____
(Please print name & extension)

Department Approval: _____
(Department Chair's Signature)

Number of Course(s): Quarter/Pay Period:

Project to pay salary: _____ INDEX Number to pay salary:

Please list the current year teaching load **BEFORE CBO** and **AFTER CBO**. (Faculty shall **not, as part of this program, teach less than two courses per year**, and at least **one** of those **must be at the undergraduate level**.)

Current Year teaching load **BEFORE CBO** Approval:

Term: _____ Course number(s): _____

Term: _____ Course number(s): _____

Term: _____ Course number(s): _____

Term: _____ Course number(s): _____

Current Year teaching load **AFTER CBO** Approval:

Term: _____ Course number(s): _____

Term: _____ Course number(s): _____

Term: _____ Course number(s): _____

Term: _____ Course number(s): _____

Notes:

Dean's Approval: _____ Date: _____

Executive Vice
Chancellor's Approval: _____ Date: _____

CANCEL/MODIFY NOTIFICATION:

_____ CANCEL CBO
_____ MODIFY and REASON: _____

Chair's Approval: _____ Date: _____