

# ADJUNCT FACULTY APPROVAL FORM

**Program Seeking Approval:**

**Legal Name of Faculty:**

---



---

**A#:**

---

It is hereby requested that the above-named person be approved to serve as a faculty member for Vincennes University to teach the following courses: **COMPLETION OF THIS FORM IS NOT CONFIRMATION OF EMPLOYMENT AT VU. A PAYROLL NOTIFICATION MUST BE COMPLETED BEFORE TEACHING AT VU.**

## Nursing, Associate Degree

Requested	Approved	Denied	Course #	Course Name
			NURS-100	Nursing Fundamentals
			NURS-101	Nursing Fundamentals Discussion
			NURS-110	Pharmacology I
			NURS-112	Pediatric-Adolescent Nursing
			NURS-113	Pediatric-Adolescent Nursing Discussion
			NURS-122	Psychosocial-Mental Health Nursing
			NURS-123	Psychosocial-Mental Health Nursing Discussion
			NURS-212	Reproductive Health and Newborn Nursing
			NURS-213	Reproductive Health and Newborn Nursing Discussion
			NURS-222	Adult Health Nursing I
			NURS-223	Adult Health Nursing I Discussion
			NURS-232	Adult Health Nursing II
			NURS-233	Adult Health Nursing II Discussion
			NURS-242	Roles of the Professional Nurse
			NURS-187	Special Instruction***
			NURS-188	Special Instruction***
			NURS-189	Special Instruction***
			NURS-297	Special Project***
			NURS-298	Special Project***
			NURS-299	Special Project***
<b>A subtitle is required for all Special Instruction/Project courses --                      Please write the requested subtitle in following the *** on the appropriate course line</b>				

Updated for 2023-24 Academic Year

**REVIEWED BY:**

**Non-Vincennes Campus**

**Vincennes Campus**

\_\_\_\_\_  
 Department Chair/Program Chair                      Date

\_\_\_\_\_  
 Department Chair/Program Chair                      Date

\_\_\_\_\_  
 Director/College Dean                                      Date

\_\_\_\_\_  
 College Dean    Date

\_\_\_\_\_  
 Vice President    Date

\_\_\_\_\_  
 Provost    Date

**NOTES:**

---



---



---