## FACULTY COURSE RELEASE OR CREDIT HOUR RELEASE TIME FORM



This form is to be used when full-time faculty are released from their regularly assigned courses or other duties so that they may perform grant-related work and should be submitted prior to the period for which released time is requested. This form is **NOT** to be used for faculty compensation during the summer. A faculty summer contract is needed for that purpose.

University Grant Account Number	Ed	Dont	D	Creat ID	
	Fund	Dept.	Program	Grant ID	
Sponsor					
Name					CSUID
Grant Position			6	ourse or Credit Hou	r Release
Time Period (semester or dates)					Number of Credits for Release
Dollar Amount				be credited where [	

## To be completed by Chair:

If released from a course, was	s someone hired as a replaceme	nt? Yes No
If yes, name of replacement:		
Course No.	Section No.	Amount Paid
Replacement was charged to	Combo Code.	

**Chair and Dean please note**: *Your signature below authorizes a budget transfer from the 0159-line to the appropriate part-time personnel line in the amount indicated above to cover the cost of the replacement.* 

	Name (please TYPE or PRINT legibly)	Signature	Date
	Submit this form to SPRSJOU	RNALS@CSUOHIO.edu	
PRS			
Department Chair/Director	Name (please TYPE or PRINT legibly)	Signature	Date
College/School Dean	Name (please TYPE or PRINT legibly)	Signature	Date
	Name (please TYPE or PRINT legibly)	Signature	Date

To Provost Office for Review

Budget Office