



REQUEST FOR CHANGE IN UNIVERSITY OF MARYLAND APPOINTMENT AGREEMENT

Before completing this form, please consult the Clark School Policy on Faculty Contracts.

I am requesting that the appointment term be modified from an academic year to a 12 month 75% State support/xx% external support appointment effective July 1, 20____. *(The maximum of xx is 25%. Please complete Table I below.)*

Please attach the following documents to this request:

- 1) New UMCP Agreement signed by all parties.
- 2) UM Request for Change in University of Maryland Appointment Agreement form.
- 3) A three-year history demonstrating a high-level of external funding and also provide evidence of high likelihood of external funding sufficient to support the individual's externally-funded portion of the annual salary

Table I. I plan to support the externally funded portion of my salary as follows:		
% of 12-Month Salary	External Funding Source	<u>FRS#</u>

This appointment change is governed by the applicable policies and procedures set forth by the University and the Clark School on Faculty Contracts.

Signature of Appointee _____	Date _____	
Printed Name _____	UID _____	Rank _____

APPROVALS

Primary Department Chair's Signature _____	Unit _____	Date _____
Primary College Dean's Signature _____	College _____	Date _____
Secondary Department Chair's Signature _____	Unit _____	Date _____
* Secondary College Dean's Signature _____	College _____	Date _____

Provost's Signature _____

*if applicable