



THE CITY UNIVERSITY OF NEW YORK
MULTIPLE POSITION REPORT FOR FULL-TIME FACULTY

This form must be completed by all full-time faculty, including full-time substitutes, in the Fall and Spring semesters.

- Please read the Statement of Policy on Multiple Positions, prior to completing this form and consult with the College Labor Designee, if you have any questions regarding the Policy.
- This form must be completed, and the necessary approvals secured, before the faculty member assumes a multiple position assignment and must be updated, whenever changes in commitments occur during the semester.

If more space is needed, please attach additional sheets using the same format.

Form fields for Date, Semester, Year, Name, College, Title/Tenure Status, and Department.

Certification by Faculty Member (Complete Part A or Part B)

Part A: I am aware of the Multiple Position regulations governing activities in addition to my regular full-time employment at College [ ]

I certify that I have no compensated or uncompensated employment, consultative or other work, grant-funded or otherwise, in addition to my regular full-time employment at the above college. I understand that the failure to complete this form fully and accurately could subject me to various penalties, up to and including termination of employment, following any applicable disciplinary proceedings.

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

If Part A is completed: No further action is required of the college

Part B: I am aware of the Multiple Position regulations governing activities in addition to my regular full-time employment at College [ ]

I certify that (check all applicable statements):

In addition to my regular full-time assignment at the College, I have supplementary employment, consultative or other work for extra compensation (including grant-funded activities), within CUNY for which complete-PMssor mation follows.

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