## FUNDING AGREEMENT AND REVIEW OF UNIT'S INSTRUCTIONAL PLANS WHEN FACULTY APPLY FOR A PRESTIGIOUS SCHOLARSHIP OR FELLOWSHIP

Faculty Handbook (Section 3.21.1.1)

Applicant name	Academic rank	Academic unit
holarship/fellowship:		
us-scholarships-fellowships-policy-pro hair/director of your academic unit to	ocedures.pdf. Please attach proposal obtain all required approvals. When	application together with this completed form, the award is received, that notification should also
arding Agent or from you; there may a thing obligations and may then be used ntal pay for increased cost of living exp	additional components to the award b d, at the discretion of the chair/directon penses, etc. <i>Only in extraordinary cas</i>	eyond a stipend. The funds will be used first to or and dean, to further assist with allowable travel es will approval be given for awards of less than
from the university alone or in combination member's budgeted line. A qualified instru	n with the Awarding Agent as described be ctor is hired at \$5,000 per course to teach	elow, and the unit either receives or retains an additional four courses the faculty member would normally have
• •		
n full OU salary and pay the award to	the university (Option 2). The individ	
by the amount of the award stipend. I benefits and may also affect life, disal nent instruction for the courses I would covering the cost of instruction may b	understand that this reduction will probility, and other benefits. I understand have normally been teaching in-load be used, at the discretion of my chair/	oportionately lessen University contributions to my d that stipend funds will be used to defray the cost during the duration of the award. Any residual
MY OU SALARY BY THE FULL AWARD A	MOUNT FOR THE DURATION OF THE	AWARD.
Applica	ant signature:	Date .
id back to the university. I understand ould have normally been teaching in-lo		fray the cost of replacement instruction for the Any residual funds after covering the cost of
UNIVERSITY OF OKLAHOMA THE FULL	AWARD AMOUNT IN CONSIDERATION	I OF RECEIVING MY FULL OU SALARY.
Applic	ant signature:	Date
	Award dates:	Award dates:

C. Below is a two-line description of the proposed project, including location, appropriate for the OU Regents' review.									
<b>D.</b> Plans	for Replacer	nent Instr	uction:						
	Courses that applicant would have been assigned to teach in-load during the duration of the award			Last time these courses were taught		Replacement Instruction Plan			
	Semester	Prefix	Number	Enrollment Limit	Semester	Actual Enrollment	Indicate replacement instructor (if known), title, salary, or payment per course.		
How ma	ny faculty in t	this unit w	vill be on lea	ve or sabbatica	al during the ti	me frame requested b	oy this individual?offacu	ltv FTF.	
E. Facult	ty distribution	n of effort	in teaching,	, research and	service in CY _	will be change	ed to/% during this leave	3.	
Signatur	es from acad	emic unit:							
							_		
ACADEMI	C CHAIR/DIREC	TOR	DAT	E COMMIT	TEE A MEMBER	DATE	COMMITTEE A MEMBER	DATE	
F. TO BE COMPLETED BY COLLEGE DEAN									
Available amount of funds from applicants salary line will be \$									
These av	ailable funds	will be all	ocated as fo	ollows: Replac Residu	ement instruc	\$\$			
Planned	use for resid	ual funds_							
COLLEGE	DEAN		DAT		k PROVOST	DATE	PRESIDENT	DATE	