Request for Reassignment Proposal

*Instructions: Complete the following form, ask your Dean to review and sign, and then submit it to the Office of Instruction.*

1. **Term in which assignment would begin** *(semester, year)*: Fall 2019

2. **Application Date** *(mm/dd/yyyy):* 10/15/2018

3. **Author(s):** David Meckler

## Overview

4. **Type of Request:**
   ☐ New request for reassignment
   ☒ Renewal of existing reassignment
   ☐ Augmentation to existing reassignment

5. **Position or Project Name:**
   Identify a "one line" description of the type of assignment (faculty leadership, coordinator, research, etc.)
   CIETL Coordinator

6. **Amount of Reassignment**

   Please report the amount of FTE you are requesting for each term and calculate the total annual FTE.
   Calculations: 0.2 FTE (3 units) = 7.5 hrs/week or approximately 120 hrs/semester. Each additional unit (0.067 FTE) represents an additional 2.5 hrs/week

   Fall *(FTE)*          0.2      Spring *(FTE)*  0.2   Total Annual *(FTE)*      0.4

7. **Duration of Reassignment**
   How many semesters of reassigned time are being requested? When is the end date? *(Please note that if the request exceeds two years, a renewal RRP will be required.)*
   4 (two year term)

8. **Commitment**
   *Upon completion of the reassignment term:*
   ☐ The work is complete and no further investment of reassigned time will be required.
   ☒ The work will require an ongoing commitment of reassigned time or other staffing.

## Justification

9. **Please list the core responsibilities to be performed and calculate the approximate number of hours per week required to perform each.** *(1 unit = 2.5 hours per week)*
   Each Flex Day planning cycle
Flex Day planning, 8 hrs per Flex Day planning cycle*
   Approval cycle ASGC, Classified Senate. 4 hrs per Flex Day planning cycle.
   Leading the Flex Day CIETL session          2 hrs
   Flex Day CIETL Session preparation          4 hrs

Revised 9.15.17 - CK

Administrative coordination, Flex Day communications, reviewing after-event survey data
8 hrs
36 hrs per Flex Day planning cycle, twice a semester, (2 x 36)/16 week semester = approximately 4.5 hrs per week

Professional Learning Committee (32-40 hrs semester total, 2-2.5 hrs per week)
Co-chairing Professional Learning Committee meeting 2 hours/month*
*about 50% overlap between Flex Day Planning and PL Committee meetings, since significant Flex Day planning occurs at PL Committee meetings
Professional Learning Committee meeting agenda preparation (in coordination with the co-chair, Dean of ASLT) 2 hr/mo
Professional Learning Committee website review, 8 hrs per semester
Professional Learning Plan, (this is every two years, next due in Spring 2020) writing, editing, reviewing revised plan (8 hours), taking it through the approval process (ASGC, PBC, Classified Senate, IPC, 8 hours). The plan calls for frequent assessment and data collection, 2-4 hours twice a semester.
Keeping informed about PD needs and activities on campus (Guided Pathways, ACES, AB705, STEM COP, FLP, etc.) 1 hour per week
CIETL Communities of Practice and single topic discussion panels (non-Flex Day sessions) Research, coordination, budgeting, planning, 1 hr per week

Total between 7.5 - 8.5 hours per week

10. **The following responsibilities are included as part of faculty workload and can be found [here](#). Please explain how the duties for which you are requesting reassigned time are different from those enumerated in Appendix D1.**
    The coordination duties enumerated above in Section 9 are not part of student instruction or curriculum work. The level of coordination exceeds typical duties of committee work.

11. **Identify how the activities align with the college's strategic plans and initiatives. *(Please limit response to 250 words).***
    The primary purpose of CIETL is committed to the college's core mission of teaching. CIETL does this by piloting, evaluating, and supporting innovative teaching and learning practices that encourage collaboration and community building and increase the retention, success, and persistence rates of our students. CIETL promotes sharing of this scholarship of teaching and learning across campus. CIETL directly aligns with the College's Student Equity Plan (goals 1 & 2), and Educational Master Plan (goal #1). Initiatives such as Guided Pathways will be supported by CIETL.

## Assessment

12. **Outcomes**
    List the outcomes that can be expected upon completion of the term of reassignment. *(Please limit response to 250 words)*
    After CIETL-led programs, participating faculty will use innovative teaching and learning ideas to cultivate students' abilities to think critically and creatively, communicate effectively, reason quantitatively to make analytical judgements, and understand and appreciate different points

Revised 9.15.17 - CK

of view.  Participating faculty will work together and share ideas across campus to promote excellence in teaching and learning.

13. **Accountability**

Describe how the activities performed under this assignment will be recorded and reported. Quantitative and qualitative assessment of effectiveness will be through survey data collected at Flex Days, the campus survey that is part of the Professional Learning Plan, participation data for CIETL single topic sessions and CIETL Communities of Practice.  The CIETL Coordinator works closely with the Dean of Academic Support & Learning Technologies, and meets with the VPI every semester and as needed.  The CIETL Coordinator is mandated to appear before the ASGC twice per semester for Flex Day agenda approval; at these and additional ASGC meetings the CIETL Coordinator answers to the faculty.

---

| **Administrative Use Only** |
|---|

**Dean's Review:**

☒ Fully support request
☐ Support with reservation
☐ Do not support (explanation required)
Explanation: Click here to enter text.

**Dean Signature: _____**

**VPI Action:**

☐ Approve request as submitted                    ☐ Deny request with recommendation to revise

☐ Approve request but with less time than          ☐ Deny request (explanation required)
requested
Explanation:  Click here to enter text.

**VPI Signature: _____**

**Recommendation for alternate funding:**

☐ Professional Development                         ☐ President's Innovation Fund
☐ Grant/Categorical (specify)                      ☐ Trustees Fund for Program Improvement
☐ Overload hourly special project                  ☐ Short-term hourly staff
☐ Stipend
Comments: Click here to enter text.

Approved Duration of Assignment:   Click here to enter text.

Outcomes and reporting requirements: Click here to enter text.

Revised 9.15.17 - CK