

**APPENDIX B-8**

**CUESTA COLLEGE  
STUDENT LEARNING OUTCOMES AND ASSESSMENT PAY  
TIMESHEET**

(Please Print or Type all information)

Name: \_\_\_\_\_ Banner ID # \_\_\_\_\_  
(Last) (First)

Please indicate semester worked:

**Fall** \_\_\_\_\_ (Paid on December 31 payroll)  
(year)

**Spring** \_\_\_\_\_ (Paid on May 31 payroll)  
(year)

In accordance with the **District/CCFT Collective Bargaining Agreement, Article Section 4.17** – by signing this request below, I affirm that I have met the standard for requesting pay for the on-going process of developing and assessing student learning outcomes as determined by my division. I am requesting the hours of pay listed below based on my current semester load as checked below. (Formula below)

- Temporary Faculty Load up to 19.9% = .5 hours per semester
- Temporary Faculty Load up to 20% - 39.9% = 1.0 hours per semester
- Temporary Faculty Load up to 39.9% - 67% = 1.5 hours per semester

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

\_\_\_\_\_  
Division Chair Date

\_\_\_\_\_  
Dean of Instruction/Director Date

Please add the "Program" Account Number to the account string below for your Division/Department:

Account String: 1100-3003-1324-  
\_\_\_\_\_

PAYROLL OFFICE USE:		
	\$74.99	\$
Total Hours	D-07, Lab Rate	Total Payment