

SAVANNAH STATE UNIVERSITY  
 3219 College Street  
 Savannah, GA 31404  
**Division of Academic Affairs**  
**Part-Time Faculty Employment Contract**

THIS AGREEMENT is made and entered into between Savannah State University (SSU) and \_\_\_\_\_  
 in a part-time faculty status for a period of one semester beginning \_\_\_\_\_ and ending \_\_\_\_\_

It is understood that this Contract defines the only terms of employment, and that nothing in this Contract states or implies continued employment beyond the ending date listed above. In consideration of this agreement, the University agrees to pay the employee for services rendered according to SSU's established salary guidelines. If this Contract is terminated before its expiration date, the salary is also terminated.

College: \_\_\_\_\_ Department: \_\_\_\_\_

<b>Budget Position #</b>

Salary Rate (by highest degree held): Ph.D./Juris Doctorate      \$3000  
 Masters      \$2500  
 Bachelors (LS courses)      \$1500

CRN & (Credit Hours)	Course Prefix & Section Number	Number of Students Enrolled	Location	Beginning Date	Ending Date	Days and Times	Salary per Course (inclusive of Labs)
1.							
2.							
3.							
4.							
<b>TOTAL</b>							

**CERTIFICATION:** This is to certify that I have read and understand my job responsibilities and believe in the philosophy and purpose of Savannah State University. I understand the provisions of this contract and that I am or will become familiar with and abide by the policies and procedures of Savannah State University. Furthermore, I understand that I must hold at least one office hour per week to fulfill the terms of this contract. I also understand that this salary will be paid in **four equal installments**. That is, instructors who begin teaching in August will receive compensation at the end of September, October, November and December. Instructors who begin teaching in January will receive compensation at the end of February, March, April and May.

Distribution: Faculty member  
 Department Chair  
 Dean  
 Provost/VPAA  
 Budget Office  
 Human Resources  
 Payroll

Signed: \_\_\_\_\_  
 Faculty Member      Date

Signed: \_\_\_\_\_  
 Department Chair      Date

Signed: \_\_\_\_\_  
 Dean      Date

Signed: \_\_\_\_\_  
 Provost/Vice President for Academic Affairs      Date

Signed: \_\_\_\_\_  
 Budget Officer      Date

**NOTE: This Contract is not official until all official transcripts are received and the appropriate signatures have been properly affixed.**

Form must be typed