

FLORIDA STATE UNIVERSITY
AMENDED ASSIGNMENT OF RESPONSIBILITIES
2009-2010

NAME:
DEPARTMENT OR UNIT:
COLLEGE:

Your _____ Semester Assignment has been changed as follows:

Instruction:

Academic Advising:

Research or Creative Activity:

Service:

Other:

FACULTY MEMBER PERFORMING DUTIES:

Signature Date

ASSIGNING AUTHORITY:

Signature Date

Dean, Director, or Vice President Signature Date

One copy of this Assignment Form with signature indicating acceptance of the assignment is to be returned to the Assigning Authority.