

[Division] MEMORANDUM

TO:Part Time InstructorFROM:[insert Division/Department Chair's name]DATE:[month, date and year]RE:[Term] Schedule

Attached is a copy of your *[Term]* Term *[Year]* teaching assignment(s). This is your official notification.

Please review and let *[insert Administrative Coordinator's name]* know if there are any discrepancies.

As usual, these appointments are subject to last minute unanticipated schedule changes, *[insert Administrative Coordinator's name]* or I will contact you if that happens.

INSTRUCTOR	COURSE	CRN	DAYS	TIME	ROOM	CREDITS
Instructor	0XX	200XX	MTRF	10-10:50 a.m.	LCC16 1XX	4
Instructor	0XX	20XXX	MTRF	12-12:50 p.m.	LCC16 2XX	4

I accept the assignment(s) listed above (signature and date):

Signature: _____ Date: _____