

APPENDIX H4
INDIVIDUAL PROPOSAL FOR FACULTY FLEX DAY
(Article 27 – Calendar)
Foothill-De Anza Community College District

Name: _____ CWID: _____
Last First

Full-time ___ Part-time ___ District Ext #: _____ Date(s) of Activity _____

Hours of activity to be credited: On-Campus _____ Off-Campus _____

Please note:

1. File this form with the Division Dean or appropriate supervisor 5 working days prior to the designated flex/conference day.
2. Attach list of fellow participants if the flex-day will be used for a collective activity of faculty in the department/division/college/District.
3. Make and retain a copy of this form for your professional records.

I. **Focus of the activity/project:**

_____ Division/Department

_____ Subject matter/discipline

_____ College

_____ Professional enhancement

II. **Abstract:**

a) Describe briefly what you will do:

b) Specify the results of your activity/project:

c) Identify at least two ways this activity/project benefits students/division/program:

III. **Approval:**

Faculty signature: _____ Date: _____

Division/Program

Administrator signature: _____ Date: _____

IV. **Activity Completed:**

Division/Program

Administrator signature: _____ Date: _____