

Buyout Time Form

Name:	Job Number:
Department:	College:
Semester: <input type="checkbox"/> Fall <input type="checkbox"/> Spring	

It is assumed that the annual teaching workload for a faculty member is 21 ICH, distributed over two semesters (nine months). The buyout rate for N ICH per academic year is $[(\text{Weighting Factor} \times N) / 21]$ of the annual academic basic salary (nine months).

Rank (please select the one that applies)	Weighting Factor
<input type="checkbox"/> Professor	1.3
<input type="checkbox"/> Associate Professor	1.4
<input type="checkbox"/> Assistant Professor	1.5

Project Number	Role	Budget Item	Amount contributed to buy out (USD)

Budget Category	Item

Number of ICH	Academic Year	Total Amount (USD)

I hereby certify that the above information is true and correct.

Signature of Principal Investigator (PI): _____ Date: _____

I hereby certify that the Department has no objection to the faculty member buying out his/her time during the proposed period (according to QU policy).

Signature of Department Head: _____ Date: _____

I hereby certify that the College has no objection to the faculty member buying out his/her time during the proposed period (according to QU policy).

Signature of College Dean: _____ Date: _____

Kindly make all the necessary actions to transfer funds to the department in charge:

Department/College:
Amount (USD):

Signature of Director of Academic Research: _____ Date: _____

**A certified copy will be sent to the department in charge after OAR approval*