

Professional Development Intent to Complete Pre-Approved Flex Activity Form

NAME: _____

DEPARTMENT: _____

OF FLEX HOURS TO BE COMPLETED: _____

Please complete the activity titles, number of hours, and date to be completed below.

Note: Only pre-approved activities are eligible

- Pre-approved event: _____

Hours: _____ Planned Completion Date: _____

- Other pre-approved flex activity: _____

Hours: _____ Planned Completion Date: _____

Intent Forms are due by the flex deadline of each year.

Completion of activities and submission of online Flex Verification Form are due by June 30.

By signing below, I understand that in order to receive Flex credit for the activities indicated above (and to avoid payroll docking) I must submit an online Flex Verification Form in my faculty portal no later than June 30.

Faculty Member Signature

Date