

**NON-SENATE ACADEMIC APPOINTEE
LAYOFF OR INVOLUNTARY REDUCTION IN TIME PROPOSAL FORM**

Name: _____ Layoff unit: _____

Title (series, rank, and step): _____

Months of FTE academic service at UCSD: _____

Proposed action: LAYOFF INVOLUNTARY REDUCTION IN TIME (FROM ____ % to ____ %)

Effective Date of proposed layoff/involuntary reduction in time: _____

Reason(s): Budgetary Lack of Work *Programmatic Change

**When proposing a layoff or involuntary reduction in time for an appointee in the Acting Professor, Adjunct Professor, or Clinical Professor series due to a programmatic change, documentation of the consultation with departmental faculty must be provided, including a vote on the decision by the faculty whose eligibility to vote has been established in accordance with Academic Senate Bylaw 55 [link].*

Department Vote: # of faculty eligible to vote: For: Against: Abstain: Absent:
(If applicable) _____ _____ _____ _____ _____

Describe consultation with departmental faculty (if applicable):

Describe the specific reasons for the proposed action:

If the reason is budgetary, the funding source(s) must be stated, and supporting documentation must be attached; in all other cases documentation is encouraged.

List appointees in the layoff unit at the same rank and in the same title or series as the selected appointee:
(Attach additional pages, if necessary.)

| Name | Title, Rank and Step | Total Months FTE (Academic Service at UCSD only) | Reason not selected (e.g., more senior, possesses a special skills, knowledge and/or abilities essential to the department, etc.) |
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Proposed alternatives to and/or postponement of layoff, if applicable:

- Leave of Absence without Pay* (maximum period of 90 days)
* Leave form must be attached
- Non-Salaried effective : _____ (maximum period of 90 days)

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