



This form is to be used to request TST approval of those being appointed as adjuncts. This category of teaching staff does have individual faculty listings on the TST website.

The TST Academic Council Policy on *Approved Categories of TST Teaching Staff* (April 2019) defines Adjunct as the following (which may not be the same definition used by colleges), faculty whose appointment does not fall within this description may fall into the TST Continuing Appointment (Non-Tenure) or Contractual Limited Term:

| | Description | Core Faculty | TST Approval | Graduate Status (Requires review by the Graduate Appointments Committee) | Maximum Approval Term |
|----------------|--|--------------|--|--|--------------------------|
| Adjunct | Have their principal professional appointment outside TST, for instance in a church or other ministry base. They typically teach at a TST college part-time on a regular or occasional basis. A search process is not required or customary before their appointment. The quality of the appointment must be consistent with the academic standards of the University of Toronto. | By Request | Adjunct Faculty Advisory Committee | By Request | Up to 3 years |

An up-to-date Curriculum Vitae is required to be submitted with the request and then annually thereafter. The TST CV Template should be used and can be found at: <http://www.tst.edu/academic/forms-faculty-administrators>.

NOTE: Adjunct Faculty delivering Supervised Pastoral Education are also required to submit proof of CASC and CRPO registration (or equivalent), as applicable, with the request and then annually thereafter.

Section 1: College Information

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|----------|-------------------------------------|-------|
| College: | Name of Person Completing the form: | Date: |
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Section 2: Candidate Information

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|--------------------------------|--|------------------|---|-------------|
| Last Name: | | First Name: | | Initial(s): |
| Start Session: | Is this Adjunct to be considered Core Faculty? <input type="checkbox"/> Yes <input type="checkbox"/> No | | Is Graduate Status being requested? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| College Email: | College Phone: | UTORid if known: | | |
| Approval Term being requested: | Area of Specialization: | | | |

Section 3: Signatures

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|---|---|--------------------------------|--------------|-------|
| Name of College Official: | | Signature of College Official: | | Date: |
| Proof of Professional Certification <input type="checkbox"/> Yes <input type="checkbox"/> No | Date of Adjunct Faculty Advisory Committee Meeting: | Reported to AC: | TST Website: | |
| End Session of Approval: | TST Approval: | | Date: | |
| Graduate Approval: | Graduate Status: | | Date: | |

Please forward the completed, signed form along with the Curriculum Vitae and other applicable documentation to the TST Registrar.