

FLORIDA STATE UNIVERSITY  
AMENDED ASSIGNMENT OF RESPONSIBILITIES  
2008-2009

NAME:  
DEPARTMENT OR UNIT:  
COLLEGE:

Your \_\_\_\_\_ Semester Assignment has been changed as follows:

Instruction:

Academic Advising:

Research or Creative Activity:

Service:

Other:

FACULTY MEMBER PERFORMING DUTIES:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

ASSIGNING AUTHORITY:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Dean, Director, or Vice President Signature

\_\_\_\_\_  
Date

One copy of this Assignment Form with signature indicating acceptance of the assignment is to be returned to the Assigning Authority.