

NEW MEXICO HIGHLANDS UNIVERSITY

Office of Academic Affairs

PO Box 9000

Las Vegas, NM 87701

CONTINGENT FACULTY **Acknowledgement and Receipt of the** *Contingent Faculty Handbook*

This is to acknowledge that I have received a copy of the *Contingent Faculty Handbook* approved by the Board of Regents on April 8, 2016. I understand that I must abide by and adhere to the policies and procedures in this handbook.

I acknowledge that any questions that I may have should be handled using the normal reporting structure, through the Department Chair, then the College/School Dean, and then the Provost/VPAA or by contacting the Chair of the Faculty Senate.

Contingent Faculty Name: _____

Contingent Faculty Signature: _____

Date of Signature: _____