UNC GREENSBORO
College *of* Arts *and* Sciences

COURSE BUYOUT REQUEST FORM

Faculty member should complete sections A-D and then obtain their Department Head's approval/ signature in section E. After obtaining Dept. Head signature, send to CAS OOR. Please note: Notice of Award must be received prior to the start date of the term for which you anticipate buy-out.

A. APPLICANT INFORMATION

Your Name: _____

Your Email: _____ Telephone: _____

Department:_____

B. FUNDING INFORMATION: ☐ Grant funding ☐ Other non-state fund

Name of Grant Funder / Fund: _____

If Grant funding, provide: Submission deadline: _____

Term of Grant (Start Date: _____ *End Date:* _____)

Total Expected Award Amount: $ _____

C. COURSE LOAD

What is your normal teaching load (example 3/3)? _____

Which course(s) do you plan to buyout? List courses and provide the following detail for each:

Semester (Term, Year) / Course # & Course Title / Credit Hours

D. APPLICANT SIGNATURE _____ Date: _____

E. DEPT. HEAD SIGNATURE

I acknowledge that, if this grant is awarded, I, as Department Head, am responsible for contacting the College Office of Budget and Personnel to discuss the usage of funds generated by the buyout

_____ Date: _____

To obtain Dean's Office Approval, email your form with D & E signatures plus any attachments to e_munoz3@uncg.edu

F. DEAN'S OFFICE APPROVAL (DEAN'S OFFICE USE ONLY)

Dean's Signature_____ Date: _____

Revised September 2026