

**DIVISION OF SOCIAL SCIENCES**  
**COURSE BUYOUT PROGRAM**  
**MODIFICATION/ CANCELLATION REQUEST FORM**

Forward requests to the Dean's Office, [dssdoi@ucsd.edu](mailto:dssdoi@ucsd.edu), once Course Buyout is Cancelled/Modified and signed by the Chair.

---

Faculty may use extramural dollars to buy out up to two courses per year, at the rate of 1/3 of the participant's annual nine-month salary, or 1/6 (16.67%) annual salary per course.

Faculty will continue to be responsible for teaching a minimum of **two (2)** courses per year with one course at the undergraduate level.

Released salary from the CBP is retained by the department for temporary FTE needs. Participation in the program should in no way reduce the service commitment of the faculty member. The faculty member must remain on campus for the duration of the buyout, with the exception of standard leaves of absence within policy. Any exceptions require EVCAA approval.

Today's Date: \_\_\_\_\_ Department: \_\_\_\_\_

Employee Name: \_\_\_\_\_  
(LAST NAME, First Name)

Payroll Title: \_\_\_\_\_

Department Contact: \_\_\_\_\_  
(Please print name and extension)

Departmental Approval: \_\_\_\_\_  
(Department Chair's Signature)

***If cancelling the CBP please skip below to Reason for Cancellation or Modification.***

---

Pay period of CBP must coincide with quarter pay periods. Please indicate the relief term and year:

Fall Quarter: July \_\_\_\_\_ – October \_\_\_\_\_ Winter Quarter: November \_\_\_\_\_ – February \_\_\_\_\_

Spring Quarter: March \_\_\_\_\_ - June \_\_\_\_\_ Number of Course(s) Requested for Release: \_\_\_\_\_

---

Please list the current year teaching load BEFORE CBP and AFTER CBP.

Current Year Teaching Load **BEFORE CBP** Approval:

Fall Quarter: \_\_\_\_\_ Course Number(s): \_\_\_\_\_

Winter Quarter: \_\_\_\_\_ Course Number(s): \_\_\_\_\_

Spring Quarter: \_\_\_\_\_ Course Number(s): \_\_\_\_\_

Current Year Teaching **AFTER CBP** Approval:

Fall Quarter: \_\_\_\_\_ Course Number(s): \_\_\_\_\_

Winter Quarter: \_\_\_\_\_ Course Number(s): \_\_\_\_\_

Spring Quarter: \_\_\_\_\_ Course Number(s): \_\_\_\_\_

Project to Pay Salary: \_\_\_\_\_  
(Award Number and Agency) (Award End Date)

Index: \_\_\_\_\_ Fund: \_\_\_\_\_ Org: \_\_\_\_\_ Percent Time: \_\_\_\_\_

Reason for Cancellation or Modification:

---

Dean's Approval: \_\_\_\_\_ Date: \_\_\_\_\_

Executive Vice  
Chancellor's Approval: \_\_\_\_\_ Date: \_\_\_\_\_