



SOUTHWESTERN COLLEGE

Faculty Auditing Inquiry Form

Use this form to alert Instructional Support Services of a problem/challenge you're having or a special request that cannot be found in the Faculty Hours Auditing Reports.

Be Specific

Provide an actionable detailed description to help us quickly resolve your inquiry in a timely manner.

Category/Subcategory Selection

Select the category and BOBJ Report that is **closely-related** to the problem/challenge you're experiencing. Not doing so may delay resolution/completion time.

To Submit

Please submit form to SWCFacultyAuditHours@swccd.edu

Requestor:	<i>(Requestor's full name)</i>	Category: <input type="checkbox"/> Contract Type <input type="checkbox"/> Position <input type="checkbox"/> Load Period <input type="checkbox"/> System Error Message <input type="checkbox"/> FWKL <input type="checkbox"/> FWLR <input type="checkbox"/> FAOA <input type="checkbox"/> Campus Organizations <input type="checkbox"/> Reassignment Roles <input type="checkbox"/> Department, Division, and School Coding	(Sub-Category) BOBJ Report <input type="checkbox"/> Faculty Hour Audit Summary <input type="checkbox"/> Faculty Hour history <input type="checkbox"/> School-Level Faculty Banked and Overload LHE <input type="checkbox"/> Section Meetings
Requested For:	<i>(Administrator's full name)</i>		*Short Description
Course Name(s):	<i>(i.e. 21/SP Engl 45 01)</i> 1. 2. 3.		Detailed Description
Faculty Full Name or ID:	<i>(i.e. Doe, John; 0314564)</i> 1. 2. 3. 4. 5.		

* Indicate requested action to be taken.