Florida A&M University
College/School: (Enter College/School)
FACULTY AOR MATRIX
Semester: (Enter Tem & Year)

	Employee's Data					Credit Generating Activities							OL / AJ	Contact Hr(s)	Credit Hr(s)	FTE	Enrollment	Non-Credit Generating Activities (*Enter FTE in cells below)									Research and Other Sponsored Activities (*Enter FTE in cells below)	
No.	Dept ID	Position Number	Empl ID	Last Name	First Name	Course Prefix	Course No.	Sec.	Course Description or Activity	Meeting Day(s) - **Optional Field**	Meeting Time - **Optional Field**							Academic Advisement	Academic Admin/Support Services	Clinical Activity	Collective Bargain Release Time	Leave of Absence with Pay	Other Instructional Efforts	Public/ Institutional Service	Supervision of Coop. Education	University Governance	Sponsored Activities	E&G Research (not project related)
I																												
TOTAL				#REF!														#REF!	#REF!	#REF!	#REF!	#REF!	#REF!	#REF!	#REF!	#REF!	#REF!	#REF!
TOTAL																												

NOTE: AJ = ADJUNCT   OL = OVERLOAD

After each instructo, total FTE before you proceed to next instructor

Data Integrity Certification

I certify that all information provided as part of the university's faculty effort reporting data integrity certification is true and correct to the best of my knowledge; and I understand that any unsubstantiated, false, misleading, or withheld information relating to this data render this certificatin void. My signature below acknowledge that I have read and understand this data. I certify that this information will be reported to the Board of Trustees and the Board of Governors.

Certification: _____
(include Dean's signature here)
Dean's Signature

Date