## Yale School of Medicine Office of Academic and Professional Development Phone: 203-785-4670; Email: faculty.affairs@yale.edu

## Request to Change Faculty Effort

Submit this completed form to: faculty.affairs@yale.edu
Date:
Name:
Department:
Rank and Track:
Current Term:
Current Effort (%):
Proposed Effort (%):
Proposed start date of Effort change:
Expected duration of Effort change:
Provide the reason for this request:
If you are requesting a change from full-time (100%) to part-time employment, please review the Yale Faculty Handbook and information provided on the Yale University benefits website (It's Your Yale). Any change below 100% can affect eligibility for the child scholarship plan, phased retirement, and emeritus status. Changes below 50% affect eligibility for a broader range of benefits. Your signature requesting this change of effort indicates your understanding of this information.
Faculty Signature/Date
Approvals:
Section Chief, if applicable/Date
Department Chair/Date
YSM Deputy Dean for Academic Affairs/Date