

ANNUAL FLEX REPORT: Full-Time Faculty

Please read the Full-Time Faculty FAQs for instructions and deadlines.

All Flex documents can be found at <https://www.lbcc.edu/post/flex-information>.

Contact Faculty Professional Development at fpd@lbcc.edu with any questions.

NAME

DEPT

EMAIL

STAFF ID

GROUP ACTIVITIES

RECORD TOTAL HOURS FOR EACH TYPE OF EVENT HOSTED BY LBCC.

FALL FLEX DAY DEPARTMENT MEETING (6 HOURS MAX):

FLOATING FLEX DAY DEPARTMENT MEETING (6 HOURS MAX):

SPRING FLEX DAY WORKSHOPS (6 HOURS MAX):

OTHER FLEX EVENTS (LIST EACH EVENT ON NEXT PAGE):

INDIVIDUAL ACTIVITIES

RECORD TOTAL HOURS FOR EACH TYPE OF INDIVIDUAL ACTIVITY.

(E.G. 12 HOURS TOTAL FOR TWO CONFERENCES, 4.5 HOURS TOTAL FOR THREE WEBINARS)

ATTACH A [FLEX VERIFICATION FORM](#) FOR EACH INDIVIDUAL FLEX ACTIVITY.

CONFERENCES (EACH 6 HOURS MAX):

WEBINARS:

OTHER INDIVIDUAL ACTIVITIES:

PRESENTER INFORMATION

IF YOU WERE A PRESENTER AT A FLEX ACTIVITY, YOU MAY RECORD DOUBLE THE TIME OF THE EVENT WITH A MAXIMUM OF 6 HOURS FOR EACH EVENT.

(E.G. 1 HOUR EVENT = 2 HOURS; 3 HOUR EVENT = 6 FLEX HOURS; 4 HOUR EVENT = 6 HOURS)

TOTAL FLEX HOURS

I HAVE COMPLETED THE APPROVED PLAN WITH A TOTAL COMMITMENT OF 18 FLEX HOURS FOR ACADEMIC YEAR _____.

SIGNATURE

DATE

GROUP ACTIVITIES LIST

PLEASE LIST THE LBCC-HOSTED FLEX ACTIVITIES YOU ATTENDED THIS SEMESTER. THESE ACTIVITIES MUST HAVE BEEN EXPLICITLY ADVERTISED AS A FLEX EVENT. DO NOT USE THIS SPACE TO LIST INDIVIDUAL FLEX ACTIVITIES; ATTACH A FLEX VERIFICATION FORM FOR EACH INDIVIDUAL ACTIVITY YOU COMPLETED.

ACTIVITY TITLE	DATE	FLEX HOURS
-----------------------	-------------	-------------------
