

## Faculty of Medicine

## **Group Teaching Declaration Form**

We hereby agree that our shared teaching contributions within the **MD Undergraduate Program** and **Postgraduate Programs** will be tracked by the UBC Faculty of Medicine as a group as detailed below.

This declaration is valid beginning,	, ι	until cancelled in	writing	to	the
appropriate department/site.					

Please provide group details, such as department, unit/site, and whether this arrangement applies to teaching with patient care only or all types of teaching:

Primary Contact Name:

Primary Contact Email:

**Primary Contact Phone:** 

We acknowledge and understand that:

- All teachers, regardless of their appointment type (e.g. clinical faculty, full-time faculty, adjunct) or eligibility for additional compensation by UBC, will have their teaching contributions tracked individually. The unit allocation, as outlined in the <u>Clinical Faculty Compensation Terms for Teaching</u> <u>in the MD Undergraduate and Post graduate Programs</u>, applies for all appointment types and will be split by the participants of the group. Those eligible for payment will be compensated for their portion of the unit(s) / session(s) delivered.
- This declaration does not detail payment instructions. Teachers should contact their department/site for information regarding payment instructions.
- The units, hours, and/or sessions tracked in TTPS as a result of this arrangement act as a record of teaching. This record may be used for other administrative functions, such as promotion.

The obligation of the group is to:

- Indicate how teaching should be split amongst group members.
- Notify UBC department in writing of any changes to group participants or allocation of percentage of teaching contribution.

## Signature Page

First Name, Last Name (please print)	UBC Appointment Type	Signature	Date	% of Teaching Contribution