

# Atlantic Cape Community College

## Faculty Observer Payment Form

Payment form is to be used for observations of traditional, remote, or online courses. A copy of the completed observation reports must be attached.

**Faculty Observer's Name:**

**College Wide I.D #:**

Faculty Name	Date(s) Observed:

**Date Form Submitted:**

**Amount (\$150 per observation):**

**Observer's Signature:**

**Signature of Department Chair/Director/Dean:**

**Date:**