COVER SHEET FOR DEPARTMENTAL TENURE FILE FOR AY __

CANDIDATE'S NAME:
CANDIDATE'S DEPT.:
CANDIDATE'S COLLEGE/SCHOOL/UNIVERSITY LIBRARIES:
MANDATORY TENURE REVIEW ___ (yes no)

Departmental Tenure Review Committee Recommends:

Tenure: _____ (#yes) _____ (#no) _____ (#abstain)

Signature of Committee Chair __________________________________ Date ____________

Evaluative statement added to primary dossier _____ yes

DEPARTMENT T & P COMMITTEE

Is the Department T & P Committee made up of all Dept. Faculty _____ (yes/no), Elected subset of Dept. Faculty _____ (yes/no), or Special Committee (some/all outside dept) _____ (yes/no)

Please Print Your Name Below

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Please Sign Your Name Below

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Departmental Chair: Tenure: _____ (yes, no)

Signature of Department Chair _____________________________ Date ____________

Evaluative statement added to primary dossier _____ yes

CANDIDATE:
I have seen all additional materials that have been requested and that will be added to my file and forwarded to the College/School/University Libraries committee for consideration. Signing this form does not constitute agreement.

Signature of Candidate _____________________________ Date ____________
COVER SHEET FOR DEPARTMENTAL PROMOTION FILE FOR AY __

CANDIDATE'S NAME: ________________________________
CANDIDATE'S DEPT.: ________________________________
CANDIDATE'S COLLEGE/SCHOOL/UNIVERSITY LIBRARIES: ________________________________

Departmental Promotion Review Committee Recommends:

Promotion: _____ (#yes) _____ (#no) _____ (#abstain)

Signature of Committee Chair ______________________________ Date _____________

Evaluative statement added to primary dossier _____ yes

DEPARTMENT T & P COMMITTEE

Is the Department T & P Committee made up of all Dept. Faculty _____ (yes/no), Elected subset of Dept. Faculty _____ (yes/no), or Special Committee (some/all outside dept ) _____(yes/no)

Please Print Your Name Below _______________________________________ Please Sign Your Name Below _______________________________________

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Departmental Chairperson: Promotion: _____ (yes, no)

Signature of Department Chair ______________________________ Date _____________

Evaluative statement added to primary dossier _____ yes

CANDIDATE:

I have seen all additional materials that have been requested and that will be added to my file and forwarded to the College committee for consideration. Signing this form does not constitute agreement.

Signature of Candidate ______________________________ Date _____________

Revised 2-24-03
COVER SHEET FOR COLLEGE/SCHOOL/UNIVERSITY LIBRARIES TENURE AND/OR PROMOTION FILE FOR AY__

CANDIDATE’S NAME:
CANDIDATE’S DEPARTMENT:
CANDIDATE’S COLLEGE/SCHOOL/UNIVERSITY LIBRARIES
CANDIDATE FOR PROMOTION ____________ (yes, no)

College Tenure & Promotion Committee Recommends:

Tenure: _____ (#yes) _____ (#no) _____ (#abstain)
Promotion: _____ (#yes) _____ (#no) _____ (#abstain)

Signature of Committee Chair ______________________________  Date _____________
Evaluative statement added to primary dossier _____ yes

COLLEGE T & P COMMITTEE

Please Print Your Name Below  Please Sign Your Name Below

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Dean of the Candidate’s College: Tenure _____ (yes, no)  Promotion _____ (yes, no)

Signature of Dean _____________________________________  Date _______________
Evaluative statement added to primary dossier _____ yes

CANDIDATE:
I have seen all additional materials that have been requested and that will be added to my file and forwarded to the University committee for consideration. Signing this form does not constitute agreement.

Signature of Candidate __________________________________ Date ______________
COVER SHEET FOR UNIVERSITY TENURE AND/OR PROMOTION FILE FOR AY _

CANDIDATE’S NAME: 
CANDIDATE’S DEPT.: 
CANDIDATE’S COLLEGE/SCHOOL/UNIVERSITY LIBRARIES: 
CANDIDATE FOR PROMOTION _______________ (yes, no)

University Tenure & Promotion Committee Recommends:

Tenure: _____ (#yes) _____ (#no) _____ (#abstain)
Promotion: _____ (#yes) _____ (#no) _____ (#abstain)

Signature of Committee Chair ________________________________ Date __________
Evaluative statement added to primary dossier _____ yes

UNIVERSITY T & P COMMITTEE

Please Print Your Name Below 

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Please Sign Your Name Below 

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Provost and Vice President for Academic Affairs and Research:

Tenure _____ (yes, no) 

Promotion _____ (yes, no)

Signature of Provost and Vice President for Academic Affairs and Research 

_____________________________________________ Date ___________
Evaluative statement added to primary dossier _____ yes

CANDIDATE:
I have seen all additional materials that have been requested and that will be added to my file and forwarded to the President. Signing this form does not constitute agreement.

Signature of Candidate ________________________________ Date ______________

President's Approval

Tenure _____ (yes, no) 

Promotion _____ (yes, no)

Signature of the President ________________________________ Date ______________