

Faculty Action for:

FACULTY PERTINENT INFORMATION	
Department Name:	Action:
Current Rank (including Modifiers, if any) :	<input type="checkbox"/> Appointment
Proposed New Rank (including Modifiers, if any) :	<input type="checkbox"/> Reappointment
Number of years at current rank: _____ Effective Date of Current Rank: _____	<input type="checkbox"/> Promotion
Faculty member's CV up-to-date?	Refresh Action Choice
Proposed Effective Date of New Rank:	

TENURE/TENURE TRACK

FIXED TERM TRACK

CHECKLIST	
<input type="checkbox"/> AP-2	<input type="checkbox"/> AP-2
<input type="checkbox"/> AP-2a (New Hire)	<input type="checkbox"/> AP-2a (New Hire)
<input type="checkbox"/> Chair's Letter <ul style="list-style-type: none"> <input type="checkbox"/> Full Prof's Vote included? <input type="checkbox"/> Full Prof's Vote Format: ___In Favor Of, ___Opposed To, ___Abstain <input type="checkbox"/> Discussion of Negative Votes or Abstentions, if any <input type="checkbox"/> Discussion of Negative Letters of Recommendation, if any 	<input type="checkbox"/> Chair's Letter <ul style="list-style-type: none"> <input type="checkbox"/> Full Prof's Vote included? <input type="checkbox"/> Full Prof's Vote Format: ___In Favor Of, ___Opposed To, ___Abstain <input type="checkbox"/> Discussion of Negative Votes or Abstentions, if any <input type="checkbox"/> Discussion of Negative Letters of Recommendation, if any
<input type="checkbox"/> External Letter of Recommendation #1: Solicited by CHAIR	<input type="checkbox"/> Official Letter #1 (External to Department)
<input type="checkbox"/> External Letter of Recommendation #2: Solicited by CHAIR	<input type="checkbox"/> Official Letter #2 (External to Department)
<input type="checkbox"/> External Letter of Recommendation #3: Solicited by CANDIDATE	
<input type="checkbox"/> External Letter of Recommendation #4: Solicited by CANDIDATE	
<input type="checkbox"/> Additional Letters of Recommendation (if applicable)	<input type="checkbox"/> Additional Letters of Recommendation (if applicable)
<input type="checkbox"/> Copy of Solicitation Letter	<input type="checkbox"/> Copy of Solicitation Letter
<input type="checkbox"/> Peer Evaluations	<input type="checkbox"/> Peer Evaluations
<input type="checkbox"/> Teaching Evaluation	<input type="checkbox"/> Teaching Summary
<input type="checkbox"/> Teaching Reviews	<input type="checkbox"/> Teaching Evaluations
<input type="checkbox"/> CV (Updated Version) Reverse Chron. Order/Date of Revision/Page #s <ul style="list-style-type: none"> <input type="checkbox"/> Teaching Statement <input type="checkbox"/> Research Statement <input type="checkbox"/> Protected Class Information Removed: D.O.B, Marital Status, Race, Gender, National Origin 	<input type="checkbox"/> CV (Updated Version) Reverse Chron. Order/Date of Revision/Page #s <ul style="list-style-type: none"> <input type="checkbox"/> Teaching Statement <input type="checkbox"/> Research Statement <input type="checkbox"/> Protected Class Information Removed: D.O.B, Marital Status, Race, Gender, National Origin
<input type="checkbox"/> Hiring Proposal (New Hire)	<input type="checkbox"/> Hiring Proposal (New Hire)
<input type="checkbox"/> Joint Appointment Form (if applicable)	