

RECOMMENDATIONS for UNUSUAL APPOINTMENT
For Rank, Years toward Tenure, or Unusual Title

1. Name of candidate _____

2. Academic Unit _____

3. Brief description of the position: _____

4. Proposed Rank: Assistant___ Associate___ Professor___

5. Proposed Years toward Tenure _____ or Proposed Granting of Tenure* _____

6. Proposed Title _____

7. Unusual condition warranting this appointment (Rationale)

8. Copy of Candidate's CV is attached

***If request regards tenure or years toward tenure, you must include the date of the unit vote and the vote tally.**

Approved _____
Department Chair

Date _____

Approved _____
Dean of College

Date _____

Approved _____
Provost

Date _____