

Revised 02/2011; updated 08/2013 by the SVP Office

PROMOTION & TENURE COMMITTEE

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Print, Sign and Insert an Original in application packet

Name: E-mail: Contact No:	2019-20 APPLICATION FORM			Date:		
Dean/birector:	Name:		E-mail:	Contact No:		
Current Rank and Discipline: Date of tenure track employment at the University: Date of last promotion at UOG: (If you are uncertain, verification may be obtained from the Human Resources Office) Have you earned tenure? YES (Date of Tenure: NO What is the effective date of your reappointment (continuing employment)? Action desired (choose one only): Tenure Major Roles: Check at least 3 appropriate ones (please consult CFES, pp. 3, 9-11); indicate appropriate percentages (must total 100%). Note: Must have at least 50% in major role for either promotion or tenure. Note: Complete one (1) form for EACH application if applying for Both Tenure and Promotion. FOR PROMOTION Solution Creative/Scholarly Activity or Research (minimum 5%) Extension and Community Activities Muniversity and Community Activities Muniversity and Community Service (minimum 5%) Library Academic Research Support Counseling Center Academic Support Counseling Center Academic Support Counseling Center Academic Support Counseling Center Academic Support Promotion and Tenure Committee to access my Promotion and Tenure Package and the Personnel Files for the purpose of review of my P&T application package.	School/College	e <u>:</u>		Unit:		
Date of last promotion at UOG:	Dean/Director:			Dean's E-mail:		
Date of last promotion at UOG: (If you are uncertain, verification may be obtained from the Human Resources Office) Have you earned tenure? YES (Date of Tenure:	Current Rank a	and Discipline:				
Have you are uncertain, verification may be obtained from the Human Resources Office	Date of tenure	track employment at the	University:			
Have you earned tenure?	Date of last pro	omotion at UOG:				
Have you earned tenure?	(If you are unce	ertain, verification may be	obtained from the	Human Resources Office)		
Action desired (choose one only):						
Major Roles: Check at least 3 appropriate ones (please consult CFES, pp. 3, 9-11); indicate appropriate percentages (must total 100%). Note: Must have at least 50% in major role for either promotion or tenure. Note: Complete one (1) form for EACH application if applying for Both Tenure and Promotion. FOR PROMOTION FOR TENURE % Instruction % Instruction % Creative/Scholarly Activity or Research (minimum 5%) (minimum 25%) % Extension and Community Activities % Extension and Community Activities % University and Community Service (minimum 5%) (minimum 15%) % Library Academic Research Support % Counseling Center Academic Support % Counseling Center Academic Support % Counseling Center Academic Support 100 % TOTAL 100 % TOTAL I, , (Print Name) authorize the members of the UOG Promotion and Tenure Committee to access my Promotion and Tenure Package and the Personnel Files for the purpose of review of my P&T application package.	What is the eff	ective date of your reappo	intment (continuir	ng employment)?		
Major Roles: Check at least 3 appropriate ones (please consult CFES, pp. 3, 9-11); indicate appropriate percentages (must total 100%). Note: Must have at least 50% in major role for either promotion or tenure. Note: Complete one (1) form for EACH application if applying for Both Tenure and Promotion. FOR PROMOTION We Instruction Creative/Scholarly Activity or Research (minimum 5%) Extension and Community Activities Muniversity and Community Service (minimum 5%) Substruction Kextension and Community Activities Muniversity and Community Service (minimum 5%) Kibrary Academic Research Support Counseling Center Academic Support Muniversity Academic Research Support Counseling Center Academic Support Muniversity Academic Research Support Munimum 15%) Counseling Center Academic Support Munimum 15%) Munimum 25%) Munimu	Action desired	(choose one only):	omotion to:			
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Promotion and Tenure Committee to access my Promotion and Tenure Package and the Personnel Files for the purpose of review of my P&T application package.	l,			, (Print Name) authorize the members of the UOG		
			•			
Signature:Date:	purpose of revi	iew of my P&T application	package.			
	Signature:			Date:		



PROMOTION & TENURE COMMITTEE

REFERENCE LETTER LIST

(E-mail a word.doc copy of this page to P&T Chair after submitting packet to HRO)

Applica	ant Name:		E-mail:		
•	(If needed, please duplicate the Please include at least two (2)	below no fewer than five (5) people from whom you wish the committee to seek recommendations. needed, please duplicate this page for additional Reference listings.) ase include at least two (2) current members of your Unit (U), of whom at least one (1) is a current mber of your Discipline (D) at UOG. Please designate these individuals with a U or a D next to the ne.			
1.	Name:	Phone:	E-mail:		
	Mailing Address:				
2.	Name:	Phone:	E-mail:		
	Mailing Address:				
3.	Name:	Phone:	E-mail:		
	Mailing Address:				
4.	Name:	Phone:	E-mail:		
	Mailing Address:				
5.	Name:	Phone:	E-mail:		
6.	Name:	Phone:	E-mail:		
7.	Name:	Phone:	E-mail:		
	Mailing Address:				

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