

Nomination for a Term Appointment to the Graduate Faculty

Name of Nominee: _____ EmplID of Nominee: _____

Academic Title: _____ Department/College: _____

Highest degree held by nominee: _____ degree in _____

Term Appointment will begin: _____

Duration of appointment (choose 1 to 5 years): _____

Courses to be taught in the first term (numbers and titles):

(A) Does the nominee possess a terminal academic degree relevant to what they will be teaching or a degree at least one level above the level at which they will teach? Yes _____ No _____

(B) If the answer to (A) is No, please describe the experience/expertise relevant to the discipline that qualifies the nominee to teach the proposed courses. This might include graduate work beyond a master's degree in a particular area, previous experience teaching at the university level, advanced licensure from a professional accrediting body, or extensive and documented professional development activities in a particular area.

Unit Chair/Dean

Date