

College of Arts and Sciences Recommendation Regarding the Reappointment of Non-Tenured Faculty

For Academic Year _____

Faculty Member Evaluated _____ **Highest Degree** _____

Academic Rank _____ **Department** _____

Has this faculty member been notified in writing that he/she will **not** receive tenure credit for the current year? _____ Yes _____ No

Years of tenure credit granted for experience prior to present position at UND: _____

Years of tenure credit for service at UND including the current academic year: _____

Total years of tenure credit at the end of the current academic year: _____

Was this evaluation made in accordance with a set of written departmental evaluation procedures on file in the College office and communicated to the faculty member? _____ Yes _____ No

Recommendation of the Department

Departmental Vote

Reappointment	_____ Yes	_____ No	_____ Abstain
Reappointment with terminal notice	_____ Yes	_____ No	_____ Abstain
Reappointment with tenure	_____ Yes	_____ No	_____ Abstain
Other (specify)	_____ Yes	_____ No	_____ Abstain

Department Chair Concur _____ Yes _____ No (If no, state reasons)

Department Chair's Signature Date

Recommendation of the College Committee

The Committee judged this to be an active recommendation based upon a definite and accepted evaluation procedure: _____ Yes _____ No

Upon consideration of the supporting material, the committee concurs with the departmental recommendation: _____ Yes _____ No

Committee Chair's Signature Date

Recommendation of the Dean

Concurs with Departmental Recommendation _____ Yes _____ No

Concurs with College Committee Recommendation _____ Yes _____ No

Dean's Signature Date