

GRADUATE FACULTY STATUS APPLICATION FORM 1

Name:				Z Number:	
First	MI Las		Agadamia Devle		
Email:			Academic Rank:		
Nominating Graduate Program:					
 MEMBERSHIP CRITERIA: Graduate Faculty appointees must he research faculty inclusive). Under exceptatus as Graduate Faculty. Associate Graduate Faculty appointee Graduate Lecturer appointees must he Graduate Faculty Emeritus appointee 	eptional circumst es must hold the r old the rank of In	ances, face ank of Acestructor, I	ulty members with junct Faculty or abo ecturer, or above.	a comparable level of expertise in expertise	may apply for
STATUS: Graduate Faculty	Associate Gra	duate Fac	ulty Graduate	Lecturer	Emeritus
APPOINTMENT PROCESS:					
Applicants seeking Graduate Faculty, As curriculum vita to the Chair or Coordinathe relevant academic unit vote on the nomination. The Chair or Coordinator of the graduate and make a recommendation on the nothe nomination.	tor of the graduat application. A sime e program up thro	e program ple major	n in the relevant aca ity of these Gradua appropriate College	ademic unit. All Graduate Faculty te Faculty members must suppor Committee and/or College Dean	y members in the must review
EVIDENCE OF SCHOLARLY OR CREAT If the nominee's curriculum vita does evidence of the following:					of paper)
 Graduate Faculty: Terminal degree s experience as determined by the Graduate teaching or graduate mento. Associate Graduate Faculty: Terminathrough experience as determined by or graduate teaching. Graduate Lecturer: At least a master determined by the Graduate Commit 	duate Committee vring. al degree suitable the Graduate Cou 's or professional	of the pro for contri nmittee o	gram; active involvouting to the prograft the program; active	ement in scholarly or creative acommor a comparable level of attaing the involvement in scholarly or creative accommon in the scholar involvement in scholar involvement involvemen	tivity, nment eative activity
GRADUATE FACULTY VOTE:	Total members	:	Votes For:	Votes Against:	
ENDORSEMENTS OF NOMINA	TION:				
Graduate Program Chair or Coordinator (Signature)	Date	College Committee Cha	air (if applicable) (Signature)	Date
College Dean or Designee (Signature)		Date			
Please submit this form and all supporti	ing documents to	the Grad	uate College, SU 80	O, Room 101.	
APPOINTMENT BY THE GRAD	UATE COLLE	GE:			
Approved Denied			Dean of the Graduate (College (Signature)	Date