

**OFFER OF FULL-TIME FACULTY APPOINTMENT**

VISITING ONLY

Name \_\_\_\_\_

Department \_\_\_\_\_ Rank: Visiting \_\_\_\_\_

Academic Specialization \_\_\_\_\_

1. Recommended salary \$ \_\_\_\_\_

Funded from account # \_\_\_\_\_

2. Length of appointment \_\_\_\_\_

3. Start date: September 1, 20\_\_\_\_. Note that the start date is always September 1 unless there are visa issues, in which case a specific start date must be included here:

\_\_\_\_\_

3. New appointment, or reappointment? \_\_\_\_\_

4. Sabbatical or leave replacement? Y/N

If yes, for whom? \_\_\_\_\_

\*\*\*\*\*

Please submit this form to the Provost, with the department chair's signature and the candidate's curriculum vitae attached.

Department Chair \_\_\_\_\_ Date \_\_\_\_\_

Affirmative Action (needed for 2 year appointments or longer)

\_\_\_\_\_ Date \_\_\_\_\_

Provost \_\_\_\_\_ Date \_\_\_\_\_

Committee on Personnel \_\_\_\_\_ Date \_\_\_\_\_

President \_\_\_\_\_ Date \_\_\_\_\_

