FSH 3560

BALLOT TO BE USED BY UNIT FACULTY FOR RECOMMENDATION ON PROMOTION IN RANK

Each reviewing individual enters his/her evaluation and recommendation below. Reviewing faculty members must have a rank higher than the candidate. If there are any considerations that support these recommendations other than those contained in the records presented to the reviewers, a brief statement of those considerations should be appended.

I evaluate the candidate’s performance of the duties assigned in his or her position description to be:

_____ exceptional
_____ above expectations
_____ meets expectations
_____ below expectations
_____ unacceptable

I _____ recommend promotion
_____ do not recommend promotion

___________________________ __________________________ __________________________________
(Signature) (Rank) (Unit)

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(Signature) (Rank) (Unit)
FSH 3560 - REPORT OF EVALUATION AND RECOMMENDATION
FOR PROMOTION IN FACULTY RANK

[Rev 2015]

Date ________________________________

Name ________________________________ Unit ________________________________

Considered for promotion to the rank of ________________________________________________

Has served in the rank of ___________________________________ since _____________________________

(month/year)

REQUIRED ELEMENTS OF EVALUATION

Having reviewed the candidate’s curriculum vitae, position descriptions and annual evaluations (including all narratives) we concur in their completeness and accuracy. Other documentary material deemed by either of us to be pertinent has been appended to the curriculum vitae.

Candidate Signature ___________________________ Unit Administrator Signature ___________________________

Copies of the documents referenced in E-2 a. were made available to the persons or groups called upon to participate in the evaluation of the candidate and to make recommendations on his or her promotion.

Unit Administrator Signature ___________________________

Unit Administrator Signature, (Faculty with joint appointments) ___________________________

Interdisciplinary/Center Administrator Signature (when appropriate) ___________________________

Interdisciplinary/Center Administrator Signature (when appropriate) ___________________________

(Recommendations continue on next page of form)
FSH 3560 - RECOMMENDATIONS ON PROMOTION IN FACULTY RANK

Each reviewing person or group enters its recommendation below. If there are any considerations that support these recommendations other than those contained in the records presented to the reviewers, a brief statement of those considerations shall be appended.

The unit promotion-recommending committee ____ does ____ does not recommend that promotion be granted: there were ____ votes in favor of and ____ votes against recommending that promotion be granted, and there were ____ abstentions.

_________________________________________________
Unit Committee Chair Signature (or N/A if no committee)

There are ____ faculty members in the unit having a rank higher than that of the candidate, and ____ of these faculty have submitted evaluations of the candidate and recommendations on the proposed promotion. Of these evaluations, ____ evaluated the candidate’s performance of assigned duties to be exceptional, ____ above expectations, ____ meets expectations, ____ below expectations, and ____ unacceptable.

Moreover, ____ faculty members recommended promotion and ____ recommended against it.

_______________________________________________________
Unit Administrator Signature (or person responsible for faculty vote)

I ____ do ____ do not recommend that the candidate be promoted.

__________________________________________________
Unit Administrator Signature (or N/A if no unit)

The college committee on promotions ____ does ____ does not recommend the proposed promotion. The committee’s vote was: ____ in favor of, and ____ against the promotion, and there were ____ abstentions.

__________________________________________________
College Committee Chair Signature

The unit administrators of this college ____did or ____ did not meet to consider collectively all of the recommendations submitted by the units. The vote of this group was: ____ in favor of, and ____ against the promotion, and there were ____ abstentions.

I ____ do ____ do not recommend that the candidate be promoted.

__________________________________________________
Dean Signature

In the university-level review committee, the votes were: ____ in favor of, and ____ against the promotion, and there were ____ abstentions.

I ____ do ____ do not recommend that the candidate be promoted.

__________________________________________________
Provost and Executive Vice President Signature

I ____ do ____ do not approve the promotion.

__________________________________________________
President Signature