### FACULTY POSITION DESCRIPTION

**ENTER CALENDAR YEAR** for review period:

<table>
<thead>
<tr>
<th>Faculty Name:</th>
<th>V Number:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title/Rank:</td>
<td>Administrative Title:</td>
</tr>
<tr>
<td>Unit(s):</td>
<td>(if applicable)</td>
</tr>
<tr>
<td></td>
<td>FTE:</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Category</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Teaching and Advising</td>
<td>60</td>
</tr>
<tr>
<td>Scholarship and Creative Activities</td>
<td>30</td>
</tr>
<tr>
<td>Outreach and Extension</td>
<td>5</td>
</tr>
<tr>
<td>University Service and Leadership</td>
<td>5</td>
</tr>
</tbody>
</table>

#### Overall description of responsibilities and goals by category:

**Faculty Member:** I agree that this is a reasonable description of my responsibilities to the University of Idaho for the forthcoming calendar year.

______________________
Signature of Faculty Member  
Date

☐ Interdisciplinary/Center Activities: Attach narrative.  

**Unit Administrator(s):** I agree that this position description is a reasonable reflection of the stated expectations for progress towards tenure, promotion and/or continued satisfactory performance.

______________________
Signature of Unit Administrator  
Date

______________________
Signature of Additional Unit Administrator  
(e.g. joint appointments [if applicable])  
Date

______________________
Signature of Additional Unit Administrator  
(e.g. joint appointments [if applicable])  
Date

**College Dean:** I agree that this position description is a reasonable reflection of the stated expectations for progress towards tenure, promotion and/or continued satisfactory performance.

______________________
Signature of Dean  
Date

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1. FSH 3050
2. See FSH 1565 for faculty responsibilities. Also, instructors will provide syllabi to their unit offices at the beginning of each term for courses for which they are responsible. Each syllabus should include expected learning outcomes for the course and should describe an example of how at least one learning outcome is assessed.
3. If the above box is checked, the unit administrator is responsible to solicit comments from, and discuss with, the interdisciplinary/center administrators listed whether the interdisciplinary/center activities as stated are accurate. All solicited comments are to be attached to this form. (FSH 3050 B-2, 3520 E-1, G-3, G-4 c, 3560 C, and E-2d, and 3320 A-1 d).