

**Division of Academic Affairs**  
**Promotion & Tenure**  
**Departmental Review Notification Form**



DATE: \_\_\_\_\_

TO: \_\_\_\_\_

FROM: \_\_\_\_\_

Department Chair's Initials: \_\_\_\_\_

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Attached is the recommendation and justification based on your recent application for \_\_\_\_\_

My initials here indicate that I have met with my department chair or direct supervisor and have been informed of the recommendation which includes being provided a copy of the written recommendation and justification.\* \_\_\_\_\_

Return this original form to the Dean's Office no later than \_\_\_\_\_  
(one week from today's meeting)

Your selection below will indicate how you would like to proceed with your submitted application. Check only one.

**TO BE COMPLETED BY CANDIDATE - CHECK ONLY ONE**

Proceed with original application - no changes.

I have e-mailed supplemental materials, as a PDF, to the Dean to be included with my application. (Not to be later than the date listed above.)

This will serve as notice that I am withdrawing my application for \_\_\_\_\_  
(see Faculty Handbook for additional guidelines.)\*

My signature below signifies that I would like my application to be processed as indicated above.

Candidate's Signature/Date: \_\_\_\_\_

Dean's Signature/Date: \_\_\_\_\_

\*Per Faculty Handbook 3.10.3 Promotion Process & 3.11.4.3 Tenure Procedures  
"The chair then meets with the candidate and informs the candidate of the recommendation, giving the candidate a copy of the written recommendation and justification."

Reset Form

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