

GRADUATE FACULTY APPROVAL FORM

Graduate Studies

GENERAL INFORMATION			
Faculty:		Updated Vita Attached:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Department:		School:	
Type of Graduate Faculty:	<input type="checkbox"/> Temporary Graduate Faculty (persons who have the expertise in an area that qualifies them to teach a graduate-level course)		
	<input type="checkbox"/> Permanent Graduate Faculty (persons who have an earned doctorate or other appropriate terminal or professional degree from a or university accredited by a regional accrediting agency; an appointment at the rank of Assistant college Professor or above; and conducted specific forms of scholarly activities in the past five years)		
Perm Grad Faculty Supervisor:		Semester/Year:	
COURSES TO BE TAUGHT (TEMP FACULTY ONLY)			
MOST RECENT REFEREED PUBLICATIONS, CONFERENCE PAPER, OR REVIEW			
RATIONALE (PLEASE INCLUDE NAMES OF ALL DEGREES EARNED)			
SIGNATURES			
Chair Recommendation:		<input type="checkbox"/> Approval <input type="checkbox"/> Disapproval	Date:
Dean Recommendation:		<input type="checkbox"/> Approval <input type="checkbox"/> Disapproval	Date:
Graduate Council Recommendation:		<input type="checkbox"/> Approval <input type="checkbox"/> Disapproval	Date:
Vice President for Academic Affairs Recommendation:		<input type="checkbox"/> Approval <input type="checkbox"/> Disapproval	Date: