

# Recommended Appointment Rank for *New Full or Part-Time Faculty at or Above Associate Professor*

(To be completed by academic department to initiate COAP's review of a proposed appointment rank for new tenured, tenure-track, professors of practice, adjuncts, affiliates, and research faculty candidates. Completed Request for Full or Part-Time Faculty Appointment Form is required separately.)

Date of Request: \_\_\_\_\_ Requesting Department: \_\_\_\_\_

Name: \_\_\_\_\_

Recommended Rank: \_\_\_\_\_

Appointment Dates: From: \_\_\_\_\_ To: \_\_\_\_\_

Tenure Track: Yes No

Non-Tenure Track: Full-Time  $\frac{3}{4}$   $\frac{1}{2}$   $\frac{1}{4}$   $\frac{1}{8}$  Other

Years at WPI (If applicable): \_\_\_\_\_

Present Rank (if applicable): \_\_\_\_\_

Briefly describe the duties to be performed and basic qualifications, special skills, and/or fields of expertise expected. Also describe teaching experience, publication record, and any other justification for rank:

Please attach additional sheet if necessary.

Dean's signature: \_\_\_\_\_ Date: \_\_\_\_\_

**A copy of most recent resume and any other pertinent information must be attached and form forwarded to Provost's Office.**

Chair of COAP: Signature \_\_\_\_\_ Date \_\_\_\_\_

Appointment Recommended at Requested Rank      Appointment NOT Recommended

Appointment Recommended at Rank of: \_\_\_\_\_

*Return Signed Form to Provost's Office*