

MEMORANDUM

TO: Office of the President

FROM: _____ (Name of Departmental Chairperson) _____ (Name of Department)

VIA: (1) Dean of the College
(2) Dean of the College of Graduate Studies
(3) Vice President for Academic Affairs

DATE: _____

RE: NOMINATION FOR APPOINTMENT TO **CLINICAL MEMBERSHIP** ON THE GRADUATE FACULTY

The purpose of this memorandum is to nominate _____ for appointment to **Clinical Membership** on the Graduate Faculty on the basis of the following Graduate School Policy: **Full-time or part-time faculty who holds at least a Master's degree and professional certification in an appropriate discipline from an appropriately accredited institution/agency/association and relevant experience in the field.** This appointment is for a three-year period and may be renewed, or a review for full membership may be requested at such time. The nominee has all the required qualifications; these are summarized as follows:

Full Title of Present Rank _____ T# Number _____

Earned Degrees*	Institutions Conferring Degrees*	Years in Which Degrees Were Earned*
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Teaching Experience (be specific)*

Research and Other Professional Experience*

Important Publications, Awards, and Honors*

Evidence of Commitment to the Academic Community, The University, His or Her Students, and Academic Discipline (i.e., involvement in university activities)*

ENDORSEMENTS:

_____ Departmental Chairperson	_____ Date
_____ Dean of the College	_____ Date
_____ Dean of the College of Graduate Studies	_____ Date
_____ Vice President for Academic Affairs	_____ Date

*A vita may be attached in lieu of any or all of this information, provided the vita includes the required information.

After approval by all, return to College of Graduate Studies, Box 5012, Derryberry Hall Room 306.