Form ASP-A
Rev 10/26/2018

University of Wisconsin-Superior
Academic Staff Promotion/Title Change Application

Applicant Name: _____ Department: _____

Current Hayes Hill Title: _____ Years in Position: _____

Check the correct box:

Promotion: ☐ **Associate to No Prefix** ☐ **No Prefix to Senior** ☐ **Senior to Distinguished**
☐ **Title Change - Proposed New Hayes Hill Title: _____**

Required supporting documentation:

- ☐ Completed Academic Staff Promotion/Title Change Application, signed/dated
- ☐ Cover Letter from Applicant (See Appendix A for criteria)
- ☐ Current Position Description from Human Resources Office
- ☐ Performance Evaluations (most recent, signed and dated; See Appendix A)
- ☐ Department Organizational Chart
- ☐ Letter(s) of Support from Supervisor (See Appendix A for criteria)
- ☐ Comparison summary (Title change only; See Appendix A for criteria)
- ☐ TEI/UW Position Questionnaire (Title change only)
  https://www.uwsuper.edu/hr/forms/upload/UWPosition-Questionnaire.pdf

I understand the submission of all documents must be received in its entirety by the close of the application deadline day. I also understand the lack of documented evidence in support of my request for a Promotion/Title Change, or incomplete submission of forms, including those requiring administrative signatures, will be cause to deny my application.

_____
Signature of Applicant Date

I have reviewed the application materials attached.

_____ _____ Action Recommended: ☐Approved ☐Denied
Signature, First Level Supervisor Date

_____ _____ Action Recommended: ☐Approved ☐Denied
Signature, Cabinet Officer Date

To Be Completed by Human Resources

Date received: _____ Date returned: _____
Number of years in current title: _____ Total number of years at UW-Superior _____
Application materials: _____ Complete _____ Incomplete _____ Performance Reviews (signed/dated)

Recommendation of Personnel/Compensation Committee

Action: ____ Approved ____ Denied Rationale for Denial:

_____ _____
Signature, Chair Date

Recommendation of Provost/Vice Chancellor of Academic Affairs

_____ _____
Signature, Provost Date