

FACULTY/INSTRUCTIONAL ACADEMIC STAFF
Recommendation for Appointment

Please complete both sides of this form.

Search No. _____

Name: _____

1 Address: _____ Department: _____

_____ Program Area: _____

Phone: _____

2 Has individual been payrolled at UW-S at any time since 1986? _____ Yes _____ No

3 Length of proposed appointment: (check one)

____ academic year contract (9 month)

____ annual contract (12-month) Starting date: _____

____ First Semester contract

____ Second Semester contract

____ Short-term or other contract Starting Date: _____ Ending Date: _____

4 Is appointment only for the period specified in 3 above and subject to automatic non-renewal? _____ Yes _____ No

5 Recommended Rank:

Faculty ranks:

Academic Staff ranks:

____ Instructor

____ Assistant Professor

____ Associate Professor

____ Professor

____ Lecturer

____ Senior Lecturer

____ Other (Specify)

6 Is this a probationary faculty appointment? _____ Yes _____ No

7 Years credit toward tenure: _____ 8. Years credit toward promotion: _____

9 Educational Training Code:

____ Code 1: Ph.D, Ed.D, or equivalent

____ Code 2: Earned degree requiring 3 full years' work beyond baccalaureate, JD, MD, DMIN, ABD

____ Code 3: Master's degree, plus 1 full year of graduate study, 6th year Specialist, 2 years Master's degree

____ Code 4: One year Master's degree

____ Code 5: Bachelor's degree

____ Code 6: No Bachelor's degree

10 Percent of appointment (FTE): _____

11 Salary for appointment period: _____

12 Full-time equivalent salary (circle annual or academic year): _____

13 Immediate Supervisor: _____

14 Position responsibilities: Teaching Load - undergraduate/graduate (100-600): _____ cr.

graduate only (700-800): _____ cr.

Specify courses (if known):

15 Additional responsibilities (please specify):

	<u>Account Title & 10-Digit Code</u>	<u>Percent</u>
16 Account(s) to be charged:	_____	_____
	_____	_____
	_____	_____

17 Attach a position description.

18 Attach a full set of credentials unless recommended appointee has been employed at UW-S in the last 5 years.

AN OFFICIAL TRANSCRIPT MUST BE FILED IN THE OFFICE OF HUMAN RESOURCES BEFORE THE CONTRACT LETTER WILL BE ISSUED (should be sent directly from institution awarding degree to search chair or Human Resources)

Department Chair _____	Date _____
Dean of Faculties _____	Date _____
Budget Officer _____	Date _____
Affirmative Action Officer _____	Date _____
Human Resources Director _____	Date _____

APPROVAL OF PROVOST

Signature: _____ Date: _____

Copy of this form and appointment letter sent to:

Chair
Payroll
Affirmative Action Officer