

PROMOTION AND TENURE COVER SHEET

Name _____ Banner ID No.: _____ Campus Box _____
(Title) (First) (M.) (Last)

College or School _____ Department _____

Date of first full-time faculty appointment at SIUE _____

Present Rank _____

Tenured Yes No

Personnel Action Being Considered:

_____ Promotion, to be effective July 1, 2024.

_____ Tenure, to be effective August 16, 2024.

| | |
|--|--|
| _____ To rank of professor _____ To rank of associate professor _____ To rank of assistant professor Effective date _____ Of current rank at SIUE _____ Years in current rank as of 6/30/2023 _____ | Date probationary period began _____ Academic year of midpoint tenure evaluation _____ Date probationary period ends _____ |
|--|--|

Please ✓ for each appropriate response below:

| Recommend Promotion | Do NOT Recommend Promotion | Recommend Tenure | Do NOT Recommend Tenure | | |
|------------------------|----------------------------------|---------------------|-------------------------------|-------------------------------|--------|
| | | | | (Department Committee) | (Date) |
| | | | | (Department Chair) | (Date) |
| | | | | (School/College Committee) | (Date) |
| | | | | (School/College Dean) | (Date) |
| | | | | (Provost and Vice Chancellor) | (Date) |
| | | | | (Chancellor) | (Date) |