Collaborative Preparing Future Faculty Network
University of Colorado at Boulder
Graduate Teacher Program
Graduate School

COPFFN Fellow: Departmental Approval Form

This form is to be signed by appropriate departmental faculty and submitted to the Assistant Director of the GTP/COPFFN as part of the COPFFN Fellow application packet.

Applicant Name: _____

Department: _____

Institution _____

Date submitted: _____

I am aware of and approve this applicant's participation as a COPFFN Fellow in the Collaborative Preparing Future Faculty Network. I understand that this initiative is part of a national program endorsed by the American Association of Colleges and Universities and the Council of Graduate Schools. I realize that the goal of Preparing Future Faculty is to give graduate students and postdoctoral fellows exposure to and hands-on experience with a variety of different faculty environments, and in this way to make faculty preparation more consistent with the actual responsibilities of faculty in diverse institutions. This preparation may include COPFFN site visits, participation in other COPFFN meetings and functions, an off-campus faculty mentorship, the completion of a self-evaluation, AND the submission of a faculty evaluation of the COPFFN Fellow's work.

Department Chair:

_____/_____
Print name Signature

Graduate Director (If applicable):

_____/_____
Print name Signature

Thesis Advisor / Postdoctoral Advisor:

_____/_____
Print name Signature

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