Post-Tenure Committee Report and Recommendation

**AY 20\_\_ - 20\_\_**

# For the College of Arts and Sciences

Person Under Review: Department: Rank:

**Summary: Sections A – D below are to include at least a few sentences regarding the faculty member’s performance.**

**A. Teaching**

**B. Research and Creative Work**

## C. Service to the University, Profession, and Community

**D. Professional Development Plan**

**E. Attach a copy of the faculty member’s current CV**

**Additional Comments:**

Post-Tenure Review Committee Recommendations. **This must include a statement regarding whether the faculty member is below, meeting, or exceeding expectations.**

**Signature of Faculty Member Under Review\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Chair/Director Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Institute Director Signature (if appropriate) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Updated 28 February 2024**