

## Transmittal for Stage 1 Approval for Faculty Excellence

---

In accordance with Provost Communication 4, please complete this transmittal, along with attachments, and submit to the Office of the Provost.

Unit(s) requesting review: \_\_\_\_\_ College: \_\_\_\_\_ Date: \_\_\_\_\_

Unit(s) requesting review: \_\_\_\_\_ College: \_\_\_\_\_ Date: \_\_\_\_\_

### REQUESTING APPROVAL FOR

#### CANDIDATE

Name of candidate: \_\_\_\_\_

Current title: \_\_\_\_\_ Institution: \_\_\_\_\_

#### TERMS

Proposed title: \_\_\_\_\_

Proposed salary: \$ \_\_\_\_\_ Proposed campus commitment: \$ \_\_\_\_\_

#### PROCESS

How was candidate identified:

Search

Other: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

#### ATTACHMENTS

Candidate's current curriculum vitae

A case for distinction in the candidate's record commensurate with the criteria for the program and contributions that could be made by the candidate to the department, college and campus.

#### APPROVALS

(For members who have joint appointments, recommendations must be approved by all units.)

Department \_\_\_\_\_ School \_\_\_\_\_ College \_\_\_\_\_

Department \_\_\_\_\_ School \_\_\_\_\_ College \_\_\_\_\_

Provost Approval: \_\_\_\_\_

Provost or Designee

Date