MINNESOTA STATE UNIVERSITY, MANKATO

**TPD--3**

**TENURE AND PROMOTION DOCUMENT**

Department Chair Statement

Name of Faculty Member__________________________________

This faculty member chose not to submit any materials for use in tenure review. (Check if applicable and proceed with review and tenure recommendation)

I. Use additional pages to comment on the achievements of the faculty member with respect to each of the five criteria:

A. Demonstrated ability to teach effectively or perform effectively in other current assignments.

B. Scholarly or creative achievement or research.

C. Evidence of continuing preparation and study.

D. Contribution to student growth and development.

E. Service to the University and community.

II. Reaction(s)/recommendation(s) of the department chairperson (all applicable):

A. On promotion to rank of____________________:

B. On tenure:

___________________________________________  ______________________
Signature                                      Date
Department Chair or Head of Unit

www.mnsu.edu/acadaf/forms/promotion/chairrecommendationtpd_3tenure