

MINNESOTA STATE UNIVERSITY, MANKATO

TPD--1

TENURE AND PROMOTION DOCUMENT TRANSMITTAL FORM

A. The attached material * has been prepared in support of: (check all applicable)

___ My application for promotion to the rank of _____

___ My consideration for a tenured appointment in the department of _____

* ___ I choose not to submit any material pertaining to my tenure review.

Signature, Faculty Member Date

B. Department recommendation: (as applicable)

on Promotion: ___ Recommended ___ Not Recommended

on Tenure: ___ Recommended ___ Not Recommended

The attached department recommendation has been prepared by faculty other than the Chairperson and was made available for review by department members including the applicant prior to forwarding through the Department Chair to the Dean.

See TPD 4 for required signatures and recommendations

Department Members' Signatures Date

C. Chair's recommendation: (as applicable)

on Promotion: ___ Recommended ___ Not Recommended

on Tenure: ___ Recommended ___ Not Recommended

I am forwarding to the Dean the applicant's materials, the department's recommendation, any individual recommendations from department faculty members, and my separate reactions/recommendations as department Chair. I have sent a copy of my reactions/recommendations to the applicant. I have also sent to the applicant a copy of any individual recommendations from department faculty members.

Signature, Department Chair Date

D. Dean's recommendation: (as applicable)

on Promotion: ___ Recommended ___ Not Recommended

on Tenure: ___ Recommended ___ Not Recommended

I hereby forward to the Provost & Senior Vice President for Academic Affairs my recommendation concerning promoting and/or tenuring this individual, together with all materials provided by the applicant, department, and Department Chair. I have provided copies of my recommendation and the Chair's recommendation to the faculty member concerned as required by the Agreement.

Signature, Dean Date