

## The Graduate School Sam Houston State University A Member of The Texas State University System

## **Graduate Faculty Status Form**

Recommendation for Appointment to, Reappointment to, or Removal from the Graduate Faculty at SHSU Attachment to Academic Policy Statement 801014, Last Reviewed December 2018

Please provide the following information about the individual being recommended for appointment, reappointment, or removal. A current curriculum vita, in reverse chronological order, must be submitted with this form. (Please use short vita for SACS.) See section 2.00 of Academic Policy Statement 801014 for institutional criteria for membership on the Graduate Faculty.

Name:				
Academic Rank:				
Department:				
Appointment/Reappointment  New Appointment  Status Renewal	n 4.00 of Acade	emic Policy Statement 801014 for review periods)		
Recommended membership (See section 1.01 of Academic Policy Statement 801014 for valid memberships)  Graduate Faculty  Associate Graduate Faculty  Remove from Graduate Faculty				
All nominations must have a recommendation from the Department Chair and approval from the Academic Dean. Upon approval and signature of the Academic Dean, this form should be forwarded to The Graduate School for notification to the Dean of The Graduate School.				
Faculty Signature*:  * Required only if faculty member is making a	a self-nominatio	Date:on.		
Department Chair Recommendation:	Approve	Signature:		
	Deny	Date:		
Academic Dean Recommendation:	☐ Approve ☐ Deny	Signature: Date:		
Dean of The Graduate School:	☐ Notified	Signature: Date:		
The Graduate School Staff	☐ Processed	Date:		



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## Comments (optional):

Use this section to provide additional rational not available on the curriculum vita to support either a positive or negative recommendation.

Person making comment:		
Title:		
Signature:		
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