

TP 6: APT (S/C/C) COMMITTEE RECOMMENDATION

Submit this form as a cover sheet to the School/College/Campus (S/C/C) committee recommendation

Candidate's Name:	Candidate's EID:
Candidate's School:	REVIEW TYPE: O Mandatory O Early Non-Mandatory
Candidate's Dept (if applicable):	
Indicate if Candidate has a: [] Joint or [] Adjunct Appt. & the School/Unit/Dept:	
Candidate's Current Rank and Track: O Assistant Professor (tenure-track) O Assistant Teaching Professor (teaching-track) . O Associate Professor (tenured) O Associate Teaching Professor (teaching-track)	O Associate Teaching Professor (teaching-track) O Professor (tenured)
APPOINTMENT, PROMOTION, AND TENURE ("APT") COMMITTEE INFORMATION:	
APT Committee Chair:	Home Unit:
APT Committee Members (and their units):	
Number of faculty on committee:	Vote Totals:# Affirmative (In-Favor)
	# Negative (Opposed)
Date of Committee Vote:	# Abstentions (Vote Withheld)
	# Did not vote (Absent)
By the above vote ¹ , the S/C/C committee recommendation is:	
O Affirmative / In Favor of Promotion to the applied-for rank	
O Negative / Against Promotion to the applied-for rank	
Name of person completing this form:	Date:

¹ Note: a recommendation in-favor of promotion requires a majority (i.e., >50%) of affirmative votes out of the total number of eligible votes