

ROUTING SHEET FOR TENURE

Name of Applicant

Department Committee (optional in small departments):

For _____

Against _____

Comments Attached _____

Include Actual Vote Count

Vote and Comments Sent to Applicant

Signature of Committee Chair

Date

Department Chair:

For _____

Against _____

Comments Attached _____

Vote and Comments Sent to Applicant

Signature of Chair

Date

College Committee:

For _____

Against _____

Comments Attached _____

Include Actual Vote Count

Vote and Comments Sent to Applicant

Signature of Committee Chair

Date

Dean of College:

For _____

Against _____

Comments Attached _____

Vote and Comments Sent to Applicant

Signature of Dean

Date

Provost and Vice President:

For _____

Against _____

Comments Attached _____

Vote and Comments Sent to Applicant

Signature of Provost and Vice President

Date

Appeals Committee (if applicable):

For _____

Against _____

Comments Attached _____

Include Actual Vote Count

Vote and Comments Sent to Applicant

Signature of Committee Chair

Date

President:

For _____

Against _____

Signature of President

Date