Action Graduate Dean's signature	Graduate School Use Only	
-	Action	
T	Graduate Dean's signature	
Date	Date	

Graduate Faculty Application (for Ad Hoc Temporary Appointments)



Name:	
Department:	
Rank:	

Graduate Degree	Mo/Yr Conferred	Major Field	Institution

The Bylaws of the Graduate Faculty provide for an Ad Hoc Temporary category (see, IV. MEMBERSHIP, Section 6):

Adjunct, part-time, visiting, non-tenure track, and other faculty members shall be eligible for *ad hoc* temporary appointments to **Category I** of the Graduate Faculty. Such appointments shall be given for the performance of specific graduate faculty functions (e.g., for teaching specific masters' or doctoral level courses, and serving on specific masters' or doctoral committees), excluding 1) the directing of doctoral dissertations or masters' theses and 2) service as the representative of the Graduate School on dissertation committees. The Dean of the Graduate School shall make such appointments for a specified period of time to fulfill specified function(s), normally for period of up to five academic years. Faculty shall be nominated for such appointments by the full-time Graduate Faculty in their departments/ schools, their department chairs/school directors, and the collegiate dean, and must possess the appropriate terminal degree, documented experience, and other credentials relevant to performance of the specified Graduate Faculty function(s), as defined by departmental/school guidelines.

Please answer the following questions and insert the relevant information directly into this document. Hand written applications will not be accepted. There is no page limit to the application. Please fill in this form, print, and sign.

- 1. Previous graduate faculty category at The University of Akron (list category and dates)?:
- 2. Time period requested:

Purpose of appointment (specify exact graduate faculty function(s) to be performed):

Credentials and/or experience relevant to graduate faculty function(s) (a current resume must be attached for our files):

(Applicant signature) Date

Graduate Faculty Application (for Ad Hoc Temporary Appointmetns)



Department Faculty:

(Dean Signature)

The Graduate Faculty in this department/school hereby attest that:: (check the valid statement, then add your quality assessment, print and sign)

- 1. the applicant's credentials merit appointment or reappointment to an Ad Hoc Temporary Graduate Faculty position for the time period and purpose specified.

2. the applicant is not recommended for appointment or reappoin period and purpose specified.	tment to an Ad Hoc Temporary Graduate Faculty position for the time
Quality Assessment:	
Insert letter or statements here. Please address items such as how the applicant's credentials, and the relevance to the purpose specified in	
	Data
(Authorized Graduate Faculty Signature)	Date
Department Chair/School Director:	
I attest that I have reviewed the applicant's credentials and the red and that I: (check the valid statement, then add your quality assessment, print and statement, then applicant for appointment/reappointment to an	
purpose specified.	The Total Temporary Graduate Faculty position for the time period and
2. do not recommend the applicant for appointment/reappointment period and purpose specified.	nt to an Ad Hoc Temporary Graduate Faculty position for the time
(Department Chair or School Director Signature)	Date
Dean of College:	
I attest that I have reviewed the applicant's credentials and that I: (check the valid statement, then add your quality assessment, print and statement).	ign)
1. recommend the applicant for appointment/reappointment to an purpose specified.	Ad Hoc Temporary Graduate Faculty position for the time period and
2. do not recommended the applicant for appointment/reappo	nent to an Ad Hoc Temporary Graduate Faculty position for the time

Note: A rationale should be attached for any recommendation differing from that of the department graduate faculty.

Date