

La Sierra University

Tenure Review Processing Form

To be filled out by Department and Dean's office

Name	Department	School
Current Academic Year	Current Rank	Inst. Asst. Assoc. Prof.
Year of tenure review _____		Yrs in rank at LSU _____
Year of end of probationary service _____		Date hired at LSU _____
Current appointment: _____ to _____		Appropriate Terminal Degree _____
Highest degree held _____ Institution _____		Date _____

<p>1. Department Recommendation: <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Date _____ Signed _____</p> <p>Another dept is submitting a separate evaluation Department _____</p>	<p>2. School Committee Recommendation: <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Committee vote: Approve _____ Deny _____ Abstain _____ Absent _____ Recused _____</p> <p>Date _____ Signed _____</p> <p>Another school is submitting a separate evaluation School _____</p>
<p>3. School Dean's Recommendation: <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Date _____ Signed _____</p>	<p>4. University Committee Recommendation: <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Committee vote: Promotion _____ Deny _____ Abstain _____ Absent _____</p> <p>Date _____ Signed _____</p>
<p>5. Provost Recommendation: <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Date _____ Signed _____</p>	<p>6. University President Recommendation: <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Date _____ Signed _____</p>
<p>7. Trustees Action: <input type="checkbox"/> Yes _____ Effective date</p> <p><input type="checkbox"/> No</p> <p>APPC Recommendation Date _____</p> <p>Trustees action # _____ Date _____</p>	<p>Comments:</p>

Copies to: Faculty Member; Dean; Department; Human Resources; School R&T Committee; University R&T Committee; President