# CONFIDENTIAL

## COLLEGE OF ARTS AND SCIENCES

### Recommendation for Tenure Review

|  |
| --- |
| Action: [ ]  **Tenure** |
| **Name of Candidate** name |
|  **Department** name |
|  |
| 1. **Teaching: The Candidate’s teaching performance is**

[ ]  **Excellent** [ ]  **Effective** [ ]  **Needs Improvement** |
| Click or tap here to enter text. |
| 1. **Scholarship: The Candidate’s scholarly work is**

[ ]  **Excellent** [ ]  **Effective** [ ]  **Needs Improvement** |
| Click or tap here to enter text. |
| 1. **Service:**

 [ ]  **Meets expectations** [ ]  **Does not meet expectations** |
| Click or tap here to enter text. |
| **D. Other Considerations Relevant to Your Decision** |
| Click or tap here to enter text. |
| **Recommendation:** [ ]  I recommend that the candidate be granted tenure in the rank of Associate Professor. [ ]  I do not recommend that the candidate be granted tenure in the rank of Associate Professor.[ ] I abstain. |
|  |
| Evaluator Name Enter name here Date Use dropdown to select date |
| Evaluator Signature  |
| *(Please save as a PDF, sign digitally, and then forward to the appropriate recipient)* |