

**NEW YORK CITY COLLEGE OF TECHNOLOGY  
of the City University of New York**

**INSTRUCTIONS FOR COMPLETING THE PROMOTION APPLICATION FORM**

DATA FORM FOR PROMOTION TO \_\_\_\_\_ Date \_\_\_\_\_  
(specify rank)

Name \_\_\_\_\_ Dept. \_\_\_\_\_

Date of Original Appointment \_\_\_\_\_

Date of Last Promotion \_\_\_\_\_

Dates of Leaves (if any) \_\_\_\_\_  
(Please attach statement regarding reasons for leave)

Date of Equivalency (if applicable) \_\_\_\_\_

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For each activity, the first line should include the type of service or committee name; the person in charge or committee chairperson; and the dates the service. This should be followed by a description of the candidate's responsibilities as a part of this activity. For non-teaching applicants, a detailed position description must be included as part of this form. This can be obtained from your supervisor or Ms. Harris's office.

Please write your descriptions in a concise manner. Single space the activity description and triple space between activities.  
(repeat this format for each entry)

**Please Follow This Sample Format**

TYPE OF SERVICE OR NAME OF COMMITTEE	PERSON IN CHARGE	DATE BEGUN/ DATE ENDED
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**Description of the candidate's responsibilities.**

**Please Print or Type**  
**(Note Deadline Date for Submission of Application)**

Name \_\_\_\_\_

Department \_\_\_\_\_ Date \_\_\_\_\_

I Service to the Department **(since last promotion only)**

Designate with an asterisk any work for which additional compensation or released time was granted. For non-teaching applicants, service to the department should include activities which are over and above those activities detailed in your position description.

Duplicate As Needed

Name \_\_\_\_\_

Department\_\_\_\_\_Date\_\_\_\_\_

II. Service to the College/University/Community (**since last promotion only**).

List all university, college-wide and/or division service as well as any public service activities that have benefitted the community at large. Designate with an asterisk any work for which additional compensation or released time was granted.

Duplicate As Needed

Name\_\_\_\_\_



III. Professional Achievements (continued)

C. Courses in field of specialization or education generally not leading to a degree.

Institution

Course Title

Date

Duplicate As Needed

Name\_\_\_\_\_

Department\_\_\_\_\_Date\_\_\_\_\_

III. Professional Achievements (continued)

D. Professional Development **(since last promotion only)**

1. Include data related to the development of knowledge and/or skills in field of specialization. Include publications, research and relevant professional seminars, workshops and conferences in this category. \_Please do not repeat information included in other categories.
2. Submit copies of all writing or other evidence of activities cited including publication dates and publishers.

Duplicate As Needed