MEMORANDUM OF TRANSMITTAL
3-YEAR TEACHING ADJUNCT APPOINTMENT CONSIDERATION

DATE:

TO:       Academic Dean

FROM:     Department Chair

SUBJECT:  Recommendation of Department Appointments Committee

ADJUNCT FACULTY: ___________________________ DEPT: ___________________________

The Department Appointments Committee (DAC) met to review the adjunct’s comprehensive record. Considered were the adjunct’s teaching performance as well as the administrative non-teaching responsibilities required of all faculty.

In addition, the DAC took into account the department’s fiscal ability and programmatic needs.

DAC Recommendation:

☐ 3-Year Appointment
   or

☐ No Appointment
   or

☐ 1-Year Appointment with Guidance [To be considered in rare instances only]
   Indicate the area(s) needing guidance: __________________________________________
   __________________________________________
   __________________________________________
   __________________________________________
   __________________________________________

Basis for DAC Recommendation:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Department Chair Signature: ___________________________ Date: _____________
Acknowledged by Academic Dean: ___________________________ Date: _____________
Acknowledged by Provost August: ___________________________ Date: _____________