

NEW YORK CITY COLLEGE OF TECHNOLOGY
OF THE CITY UNIVERSITY OF NEW YORK

**DOCUMENT CERTIFICATION
PROMOTION**

Date

TO: Office of Faculty and Staff Relations

FROM: _____

DEPARTMENT: _____

SUBJECT: _____, candidate for promotion
to the rank of _____.

ELECTED PEER: _____

The following documents are attached:

_____Memorandum of Transmittal

_____Peer Report

_____Minority Report (if applicable)

_____Conference Memorandum (with signature of candidate)

_____Page with Name and Signature of all Peers