



**NEW YORK CITY
COLLEGE OF TECHNOLOGY**
THE CITY UNIVERSITY OF NEW YORK
OFFICE OF FACULTY AND STAFF RELATIONS
300 JAY STREET • Namm 301/305
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MEMORANDUM OF TRANSMITTAL

DATE: _____

TO: **Office of Faculty and Staff Relations**

FROM: _____
Name _____ Department/Program _____

SUBJECT: () Appointments Committee Action 2nd [] year Reappointment
() Peer Committee Action 3rd [] or 5th [] 6th []
() Promotion 4th [] or 7th [] Tenure []
() Academic Leave

Staff Member _____ Rank _____
(Last name, first)

At its meeting of ____/____/____, the above indicated committee took the following action with respect to the above-named individual on the date indicated.

The vote on this matter was _____ - _____ - _____.

Yes No Abstain

	<u>Recommended</u>	<u>Not Recommended</u>
a) Appointment	_____	_____
b) Reappointment	_____	_____
c) Reappointment with Tenure	_____	_____
d) Promotion to Senior CLT	_____	_____
e) Promotion to Associate Professor	_____	_____
f) Promotion to Professor	_____	_____
g) Promotion to Adj. Assoc. Professor	_____	_____
h) Promotion to Adj. Professor	_____	_____
i) Fellowship/Scholar Incentive Leave	_____	_____

I hereby certify that all the annual evaluations, observations, student opinion reports, memoranda, and any other appropriate documents were available to all members of the committee.

Signature of Chair/Coordinator Date

Noted by: _____
Academic Dean Date