

**REAPPOINTMENT APPRAISAL AND RECOMMENDATION FORM  
FOR CLINICAL TRACK OR TENURE TRACK FACULTY**

**Faculty Member's Information**

Name: \_\_\_\_\_ Current rank: \_\_\_\_\_

College: \_\_\_\_\_ Department: \_\_\_\_\_

Year & Semester Appointed: \_\_\_\_\_

For tenure track faculty: Year eligible for tenure: \_\_\_\_\_ Year(s) of tenure credit (if applicable): \_\_\_\_\_

Leaves of Absence (list semester(s), if applicable): \_\_\_\_\_

Years in present faculty rank, as of the end of current academic year:

At USI: \_\_\_\_\_ Elsewhere: \_\_\_\_\_ Total: \_\_\_\_\_

Each review committee or administrator prepares a memo summarizing the appraisal of the applicant's progress in the evaluation areas listed in the [University Handbook](#) and appropriate College/unit guidelines, including specific achievements, strengths, and weaknesses in the applicable evaluation areas. This form, the accompanying appraisal memo, and supporting materials (as applicable) shall be inserted in Section I.1 of the faculty member's portfolio.

**Evaluation by the College Dean or Director of Library**

Recommendation:  Reappointment  Conditional Reappointment  Non-Reappointment

Name and Signature of Dean or Director of Library:

\_\_\_\_\_ Date \_\_\_\_\_

**Faculty Acknowledgement:**

I have reviewed the above appraisal and recommendation.

Faculty Member's Signature: \_\_\_\_\_ Date \_\_\_\_\_

**Evaluation by the Provost**

Reappointment  Conditional Reappointment  Non-Reappointment

\_\_\_\_\_ Date \_\_\_\_\_

Mohammed F. Khayum, Provost