

# ANNUAL RECOMMENDATION ON RETENTION OF TENURE-TRACK FACULTY

Name of faculty member: \_\_\_\_\_

Rank: \_\_\_\_\_ Department: \_\_\_\_\_

Year of appointment: \_\_\_\_\_ Tenure consideration scheduled for AY: \_\_\_\_\_

Name of assigned faculty mentor: \_\_\_\_\_

*This form documents the retention review process according to the procedures in Part I of the Manual for Faculty Evaluation. All narratives, reports, statements, and responses generated in the retention review process are attached to this form.*

1. **Review by the tenured faculty.** The narrative of the tenured faculty is attached and the vote recorded below.

Vote of the tenured faculty: For retention \_\_\_\_\_ Against retention \_\_\_\_\_ Abstention \_\_\_\_\_

Recuse (state reason for conflict) \_\_\_\_\_

2. **Review by the department head.** The report of the department head is attached.

The department head recommends:  retention  termination as of \_\_\_\_\_

Overall rating:             Exceeds Expectations             Meets Expectations  
                                  Needs Improvement             Unsatisfactory

Signature of department head: \_\_\_\_\_ Date: \_\_\_\_\_

3. **Review by the faculty member.**

Signature of faculty member: \_\_\_\_\_ Date: \_\_\_\_\_

4. **Review by the dean.** The dean's statement (when required by Part I.B.2 of this manual) is attached.

The college recommends:  retention  termination

Signature of dean: \_\_\_\_\_ Date: \_\_\_\_\_

5. **Review by the chief academic officer.** The chief academic officer's statement (when required by Part I.B.3 of this manual) is attached.

The chief academic officer recommends:  retention  termination

Signature of the chief academic officer: \_\_\_\_\_ Date: \_\_\_\_\_