



FACULTY APPOINTMENT RECOMMENDATION TO THE PRINCIPAL

Name of candidate: _____

Join a copy of the c.v. when new or previously part-time

Department: _____

Appointment: Full time: _____ Part-time _____

Sessional: _____

Probationary: _____ years

As per Article _____ of the Collective Agreement

Duration: _____ Time period - Beginning _____

Ending: _____

Level: _____ Rank: _____

Rationale for level and rank: _____

Ph.D. Requirements: By which date: _____
(if applicable)

New level: _____ New rank: _____

The teaching duties have been discussed with: _____

Dean's signature: _____

Other specifications:

Signature: _____ Date: _____

Chair, Appointments Committee