



FACULTY EMPLOYMENT AUTHORIZATION FORM

As more faculty are hired and more individuals have a hand in interviewing candidates, it is necessary that each step of this process be carefully documented. This form serves as a checklist and should accompany the prospective faculty member's dossier as it moves from initial contact to final approval to employ. [The faculty member's dossier must include an application and a resume.]

This form has three parts: (1) a description of the prospective faculty member, (2) a description of the position to be filled, and (3) a page for recommendations and authorization for employment. With regard to the third step, it is recognized that not every level of recommendation is needed in every case. Nor is it necessary to follow the order rigidly. Finally, the signatures below the presidential level are to be construed as recommendations rather than final approval to be employed.

I. DESCRIPTION OF THE PROSPECTIVE FACULTY MEMBER

Last Name _____ First Name _____

Highest Degree _____

Discipline _____

II. DESCRIPTION OF THE POSITION APPLIED FOR

Position Applied For _____

Check one: full-time adjunct percentage of fulltime [75% 50% 25%]

Recommended rank or title _____
[Final decision to be made by the President on recommendation of Provost]

Months of professional responsibility _____ Effective date _____

Annual salary (and point determination) _____

Location of teaching _____ [NCRC, NCMC, NCDC, etc.]

Courses to be taught FALL:

_____ Title _____

_____ Title _____

_____ Title _____

_____ Title _____

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Last Name _____ First Name _____

Courses to be taught SPRING:

_____ Title _____

_____ Title _____

_____ Title _____

_____ Title _____

III. RECOMMENDATIONS AND AUTHORIZATION

Indicate references contacted and results under Comments. Your signature indicates your approval of the information contained herein and your recommendation to hire.

Department Head/Deputy Department Head _____ Date _____

Comments:

School Dean _____ Date _____

Comments:

Provost _____ Date _____

(Necessary only for full-time positions)

Comments:

EVP & Treasurer _____ Date _____

(Necessary only for full-time positions)

Comments:

President _____ Date _____

(Necessary only for full-time positions)

Comments: