FAYETTEVILLE STATE UNIVERSITY FACULTY PERSONNEL ACTION FORM TENURE, PROMOTION, REAPPOINTMENT OR NON-REAPPOINTMENT

Name				
Department	College/School			
LAST PERSONNEL	REQUESTED PERSONNEL ACTION (check one)			
■ Initial 2-year Appointment		■ 2nd 2-year Term		
■ 2nd 2-year Term		■ Three-year	Term	
■ Three-year Term		Promotion (to)		
■ Promotion		■ Tenure		
■ Tenure	Date			
Requestor's Signature	Date			
I. DEPARTMENT TENURED SENIOR FACULTY (Number Eligible)				
DATE OF VOTE	# AGREE	# DISAGR	EE	# ABSTAIN
I Chair, Departmental RPT C	Committee		Date _	
II			Date _	
Department Chairperson	Agree	Disagree		
III. COLLEG	E/SCHOOL TENURE, PROM	MOTION, REAPPOI	NTMENT C	COMMITTEE
DATE OF VOTE	# AGREE	# DISAGREE		# ABSTAIN
III			Date _	
IV College/School Dean	Agree	Disagree	Date _	
College/School Death	Agree	Disagree		
VI		Disagree	Date _	
VII Chancellor	Agree	Disagree	Date _	