



Recommendation for Appointment to Graduate Faculty Status

Complete this form in a PDF viewer and submit it with the required attachments to the Graduate School. Handwritten forms are not accepted.

Name E-mail

Dept, School, or Program M Number

1. Appointee Information

a. Does appointee have a faculty or academic administrator appointment at Michigan Tech?

- Yes No (Not eligible for full appointment)

b. Does appointee have a terminal degree in their field?

- Yes No (Not generally eligible for full appointment)

c. Provide information below

Current primary position (Title and Department)

Current employer (if not at Michigan Tech)

2. Recommendation for (select Full or Associate):

- Full Appointment (may teach and be sole advisor, status subject to periodic review)

List research interest keywords, separated by commas, for use on the Graduate Faculty Locator.

- Associate Appointment (Check all that apply, provide details as requested. Associate appointments expire with faculty appointments, if teaching, or when the specified student graduates, if serving on a committee.)

Permission Sought/level	Master's	Doctoral	Details (list of courses or name(s) of student(s))
Teach graduate courses (list all) Master's: 5000; Doctoral: 6000	<input type="checkbox"/>	<input type="checkbox"/>	
Serve as committee member	<input type="checkbox"/>	<input type="checkbox"/>	
Serve as co-advisor	<input type="checkbox"/>	<input type="checkbox"/>	

3. Attachments (include with this form and forward for approvals noted below):

- Appointee CV
- If the appointee does not have a terminal degree, please attach a statement that provides evidence of a record of research, scholarship, or achievement for this Graduate Faculty status appointment

4. Obtain signatures noted below. Return signed form with all attachments to the Graduate School.

_____ Date _____ Date

For Graduate School use only - image form and update SIAINST after decision

Request Status: Approved Approval Signature _____

Denied Denial reason _____