

## **Review Procedure for Applicants to the Graduate Faculty Florida International University**

Completed applications with departmental & college approvals are due at UGS no later than **October 15** for fall and **March 15** for spring. **YOU MUST SAVE THE PDF FORM ON YOUR COMPUTER BEFORE COMPLETING OR ALL TEXT WILL BE LOST.**

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| <b>Applicant</b>                              | Completes Parts I and II of the application.   |
| <b>Departmental Review</b>                    | The evaluation committee in each department (Schools residing within Colleges are considered departments for the purposes of this review) must consist of at least three members of the Graduate Faculty. Applications will be reviewed in accordance with the criteria outlined in the University Policies regarding Graduate Faculty. Applications not approved by the departmental committee are not forwarded. |
| <b>Department Chairperson</b>                 | If the department Chairperson is a member of the Graduate Faculty, he or she makes an independent recommendation and forwards the application to the unit Dean. If the department Chairperson is not a member of the Graduate Faculty, he or she forwards the application to the unit Dean without recommendation (place N/A in designated area).  |
| <b>Dean of the College or School</b>          | The unit Dean makes and justifies his or her recommendation and forwards the application to the Dean of the University Graduate School.  |
| <b>Dean of the University Graduate School</b> | The Dean of the University Graduate School makes and justifies his or her recommendation and forwards the application to the Provost.  |
| <b>Provost</b>                                | The Provost makes the decision whether or not to appoint the applicant to the Graduate Faculty.  |

Questions should be directed to Irene Baquero at the University Graduate School  
Please call 305-348-3342 or email: [ibaquero@fiu.edu](mailto:ibaquero@fiu.edu)

## Graduate Faculty Application

Name \_\_\_\_\_ Date \_\_\_\_\_

Department \_\_\_\_\_ School or College \_\_\_\_\_

Tenure Status:  Tenured  Tenure Earning  Not Tenured or Tenure-Earning

Date appointed to Graduate Faculty (for reappointments) \_\_\_\_\_

**I. Describe** briefly the accomplishments which support your appointment or reappointment to the Graduate Faculty. In particular, offer significant and/or recent evidence regarding your scholarship and creative activity and involvement in graduate education. If you need more space than that allotted below, attach a maximum of two (2) double-spaced pages in response.

**II. Attach** a current curriculum vitae.

**Transmittal Form - 1**

Applicant \_\_\_\_\_ Department \_\_\_\_\_

**Department Recommendation:** \_\_\_\_\_ Recommended \_\_\_\_\_ Not Recommended

Please justify your recommendation by commenting on the applicant's qualifications and competence to serve on the Graduate Faculty.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Chair's Recommendation:** \_\_\_\_\_ Recommended \_\_\_\_\_ Not Recommended

Please justify your recommendation by commenting on the applicant's qualifications and competence to serve on the Graduate Faculty.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Transmittal Form - 2**

Applicant \_\_\_\_\_ Department \_\_\_\_\_

**Unit Dean's Recommendation:** \_\_\_\_\_ Recommended \_\_\_\_\_ Not Recommended

Please justify your recommendation by commenting on the applicant's qualifications and competence to serve on the Graduate Faculty.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Graduate Dean's Recommendation:** \_\_\_\_\_ Recommended \_\_\_\_\_ Not Recommended

Please justify your recommendation by commenting on the applicant's qualifications and competence to serve on the Graduate Faculty.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Provost's Decision:** \_\_\_\_\_ Appointed \_\_\_\_\_ Not Appointed

Signature \_\_\_\_\_ Date \_\_\_\_\_