

Appendix C (NTE)

Record of Promotion Votes and Recommendations

Name of Candidate: _____

Dept. and College: _____

Rank: _____

Date Appointed to Rank: _____

Type of Action:

- _____ Promotion to the rank of Senior Lecturer
 _____ Promotion to the rank of Clinical Assistant Professor

Record of Actions	Recommendation		Vote	
	Yes	No	Yes	No
Department Chair				
College Committee				
Dean's recommendation				
Provost's recommendation				

College Committee

Name _____

Name _____

Name _____

Name _____

Name _____