

**Wright State University Graduate School  
GRADUATE FACULTY MEMBERSHIP  
NOMINATION AND REVIEW**

Name \_\_\_\_\_ Academic Rank \_\_\_\_\_

Discipline/Specialization \_\_\_\_\_ Department \_\_\_\_\_

School/College \_\_\_\_\_ **check one:**  Regular Membership  
 Adjunct Membership  
 Temporary Membership

Request for membership to:  teach graduate level courses  
 serve on thesis/dissertation committees

Recommended by \_\_\_\_\_ Date \_\_\_\_\_  
(Print name) (Signature)  
Department Chair or Graduate Committee, if any

Reviewed by \_\_\_\_\_ Date \_\_\_\_\_  
(Print name) (Signature)  
College/School Graduate Committee

Approved \_\_\_\_\_ Date \_\_\_\_\_  
(Print name) (Signature)  
Dean, College/School

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**CRITERIA FOR MEMBERSHIP** – Please answer the four questions below:

*Nominations that do not meet the primary criteria as noted by the four (4) questions below are forwarded to the Membership Committee, along with all necessary explanatory and supporting material. The Membership Committee will review these nominations in accordance with the Graduate School policy. Nominations may be approved by the Committee, in which case they are sent to the Dean for concurring signature and recording in the list of graduate faculty, and reported to the Graduate Council.*

**1. Does the candidate have a rank of Assistant Professor (including Research or Clinical) or above at a graduate-degree-granting academic unit at Wright State University? (Please note that candidates not meeting this criterion will be considered only for adjunct graduate faculty status.)**  Yes (go to question 2)  
 No (go to question 2)

**2. Does the candidate possess a terminal degree (as defined by their profession) in the appropriate field, subfield, or closely related field to which they are anticipated to be assigned?**  Yes (go to question 3)  
 No (go to bullet below)

- If the candidate has no terminal degree, does the candidate possess a master's degree in the appropriate field, subfield, or closely related field?  Yes (go to question 3)  
 No (go to bullet below)
- If the candidate does not have a related master's degree, please justify the nomination of this individual for graduate faculty status in the textbox below, then continue to question #3:

Insert justification here or attach a letter:

**3. Does the candidate have a current (within the past 5 years) and relevant record of scholarship or creative endeavors?** \_\_\_\_\_Yes (go to question 4)

\_\_\_\_\_No (go to bullet below)

- If the candidate has no current scholarship, does the candidate have 5 years of tested professional experience in the field/subfield? \_\_\_\_\_Yes (go to question 4)  
\_\_\_\_\_No (go to bullet below).
- If the candidate has no current scholarship or has less than 5 years of tested experience, please justify the nomination of this individual for graduate faculty status in the text box below, then continue to question 4.

Insert justification here or attach a letter:

**4. Does the candidate have demonstrated involvement in graduate instruction through teaching and, where applicable, graduate student supervision?** \_\_\_\_\_Yes

\_\_\_\_\_No (go to bullet below)

- If the candidate has no graduate teaching experience, please provide a statement from an appropriate college authority citing strong supporting evidence of graduate teaching potential in the text box below.

Insert statement here or attach a letter:

- Name of person completing text boxes: \_\_\_\_\_
- Position \_\_\_\_\_

**ATTACH A CV** for the candidate indicating degrees held, employment history, teaching experience, and scholarly/creative activities.

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Reviewed by \_\_\_\_\_ Date \_\_\_\_\_  
Dean, Graduate School

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**MEMBERSHIP COMMITTEE ACTION:** \_\_\_\_\_Approve \_\_\_\_\_Deny

\_\_\_\_\_ Date \_\_\_\_\_  
Chair, Graduate Membership Committee

**GRADUATE SCHOOL ACTION:** \_\_\_\_\_Approve \_\_\_\_\_Deny

\_\_\_\_\_ Date \_\_\_\_\_  
Dean, Graduate School