

## **Graduate Faculty Application Instructions**

(Tab to complete checklist and application fields.)

- 1) Complete the application checklist to determine the appropriate category.**
  
- 2) Complete the two page application cover sheet and obtain required signatures (Applicant, Department Chair/ School Director and College Dean).**
  
- 3) Attach current vita and if applicable include written justification.**
  
- 4) Submit Cover Sheet, Checklist, Current Vita, and written justification (if applicable) to:**

**Graduate College  
Dean's Office  
P O Box 6928**

**If you have questions contact the Graduate College at 831-7163.**

(Tab to complete checklist and application fields.)

**Graduate Faculty Application Checklist** (Select appropriate category & attach to application):  
**Type in Name of Applicant** \_\_\_\_\_

**I. GRADUATE FACULTY (can teach graduate classes, supervise directed studies and recitals, chair and serve on exam and thesis committees; however, chairing a thesis committee may involve long-term service and care should be taken in assigning non-tenure/non-tenure track faculty as chairs):**

<input type="checkbox"/> A. <u>Qualifications</u>	<u>Submit</u>	<u>Approvals Needed</u>
Full-time	Cover Sheet	Chair/ School Director
AND	Current Vita	College Dean
Tenured/tenure track		Graduate College Dean
AND		Provost
Doctorate or MFA (in the teaching field)		

**OR**

<input type="checkbox"/> B. <u>Qualifications</u>	<u>Submit</u>	<u>Approvals Needed</u>
Full-time	Cover Sheet	Chair/ School Director
AND	Current Vita	College Dean
No Doctorate or MFA or Doctorate not in the teaching field	Written Justification	Graduate Affairs Committee
OR		Graduate Dean
Special purpose, temporary, or A-P		Provost

**II. ADJUNCT GRADUATE FACULTY (can teach graduate classes, supervise directed studies and recitals, and serve on exam and thesis committees):**

<input type="checkbox"/> A. <u>Qualifications</u>	<u>Submit</u>	<u>Approvals Needed</u>
Adjunct or Part-Time	Cover Sheet	Chair/ School Director
AND	Current Vita	College Dean
Doctorate or MFA (in the teaching field)		Graduate College Dean
		Provost

**OR**

<input type="checkbox"/> B. <u>Qualifications</u>	<u>Submit</u>	<u>Approvals Needed</u>
Adjunct or Part-Time	Cover Sheet	Chair/ School Director
AND	Current Vita	College Dean
No Doctorate or MFA or Doctorate not in the teaching field	Written Justification	Graduate Affairs Committee
		Graduate Dean
		Provost

<input type="checkbox"/> III. <u>GRADUATE FACULTY ASSOCIATE</u> (Sole responsibility is to teach or supervise graduate students in clinical, practica, internship, or similar courses):	<u>Submit</u>	<u>Approvals Needed</u>
<u>Qualifications</u>		
Adjunct, Part-time, or Full-time	Cover Sheet	Chair/ School Director
Minimum of a Master's Degree	Current Vita	College Dean
Any additional certifications, licenses, or years of experience required by department	Written Justification	Graduate Affairs Committee
		Graduate Dean
		Provost

<b>FOR GRADUATE COLLEGE USE ONLY</b> Expires end of _____ <p style="text-align: center;">Term                      Year</p>
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**Name** \_\_\_\_\_

**Department/  
School** \_\_\_\_\_

**Program** \_\_\_\_\_

**Box Number** \_\_\_\_\_

**Phone** \_\_\_\_\_

**E-mail** \_\_\_\_\_

**Applying for Graduate Faculty Status in Category:**  
(Select category determined by attached checklist.)

- I. A. Graduate Faculty (include current vita)
- I. B. Graduate Faculty (include current vita and justification)\*
- II.A. Adjunct Graduate Faculty (include current vita)
- II.B. Adjunct Graduate Faculty (include current vita and justification)\*
- III. Graduate Faculty Associate (include current vita and justification)\*

\* The basic criterion for graduate faculty is a doctorate or MFA. If a faculty member does not have an earned doctorate or MFA in the teaching discipline or related field, then written justification giving compelling reasons why the person should teach graduate courses and documenting how the person's experience, training, and expertise are exceptional (i.e., equate to the doctorate or MFA level) must be included.

Limitations: If this applicant is limited to specific courses or activities, list the course prefixes and numbers (e.g., COSD 640) for courses, clinical supervision, practica, or internships this applicant will be authorized to teach: \_\_\_\_\_

# Graduate Faculty Application/ COVER SHEET

Type in Name of Applicant \_\_\_\_\_

Applicant's Signature \_\_\_\_\_

Print or Type Name:	Signatures:	Date:
Department Chair/ School Director		
College Dean		
Graduate College Dean		
Provost		