

University of Guam  
Promotion and Tenure Committee  
Academic Year 2017-18

*Print, Sign and Insert an Original in application packet*

**2017-18 APPLICATION FORM**

**Date** \_\_\_\_\_

Name: \_\_\_\_\_ E-mail: \_\_\_\_\_

School/College: \_\_\_\_\_ Contact # \_\_\_\_\_

Unit: \_\_\_\_\_

Dean/Director: \_\_\_\_\_ (Dean's E-mail: \_\_\_\_\_)

Current Rank and Discipline: \_\_\_\_\_

Date of tenure track employment at the University: \_\_\_\_\_

Date of last promotion at UOG: \_\_\_\_\_  
(If you are uncertain, verification may be obtained from the Human Resources Office)

Have you earned tenure? \_\_\_ Yes (Date of Tenure: \_\_\_\_\_) \_\_\_ NO

What is the effective date of your reappointment (continuing employment)? \_\_\_\_\_

Action desired \_\_\_\_\_ Promotion to: \_\_\_\_\_  
**(choose one only):**  
\_\_\_\_\_ Tenure

**Major Roles:** Check at least 3 appropriate ones (please consult CFES, pp. 3, 9-11); indicate appropriate percentages (must total 100%). **Note:** Must have at least 50% in major role for either promotion or tenure.

**Note:** Complete one (1) form for EACH application if applying for Both Tenure and Promotion.

For Promotion

For Tenure

\_\_\_\_\_ % Instruction  
 \_\_\_\_\_ % Creative/Scholarly Activity or Research  
                   **(minimum 5%)**  
 \_\_\_\_\_ % Extension and Community Activities  
 \_\_\_\_\_ % University and Community Service  
                   **(minimum 5%)**  
 \_\_\_\_\_ % Library Academic Research Support  
 \_\_\_\_\_ % Counseling Center Academic Support

\_\_\_\_\_ % Instruction  
 \_\_\_\_\_ % Creative/Scholarly Activity or Research  
                   **(minimum 25%)**  
 \_\_\_\_\_ % Extension and Community Activities  
 \_\_\_\_\_ % University and Community Service  
                   **(minimum 15%)**  
 \_\_\_\_\_ % Library Academic Research Support  
 \_\_\_\_\_ % Counseling Center Academic Support

\_\_\_\_\_ 100% TOTAL

\_\_\_\_\_ 100% TOTAL

I, \_\_\_\_\_, (Print Name) authorize the members of the UOG Promotion and Tenure Committee to access my Promotion and Tenure Package and the Personnel Files for the purpose of review of my P&T application package.

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

# Reference Letter List

(e-mail a word.doc copy of this page to P&T Chair after submitting packet to HRO)

Applicant Name: \_\_\_\_\_ E-mail: \_\_\_\_\_

- List below **no fewer than five (5) people** from whom you wish the committee to seek recommendations. (If needed, please duplicate this page for additional Reference listings.)
- Please include at least two (2) current members of **your Unit (U)**, of whom at least one (1) is a current member of **your Discipline (D)** at UOG. Please designate these individuals with a U or a D next to the name.

1. \_\_\_\_\_ Name: \_\_\_\_\_ Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

2. \_\_\_\_\_ Name: \_\_\_\_\_ Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

3. \_\_\_\_\_ Name: \_\_\_\_\_ Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

4. \_\_\_\_\_ Name: \_\_\_\_\_ Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

5. \_\_\_\_\_ Name: \_\_\_\_\_ Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

6. \_\_\_\_\_ Name: \_\_\_\_\_ Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

7. \_\_\_\_\_ Name: \_\_\_\_\_ Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
\_\_\_\_\_