APPLICATION FOR GRADUATE FACULTY STATUS

Faculty Name:					
Degree (level and discipline):					
Graduate Program (one per form):					
Instruction at the graduate level: Please list graduate-level courses taught over the preceding three years (including 400/G courses).					
Course Term					

Advising at the graduate level: Please list the names of graduate students for whom you served as the major advisor for the preceding three years.

Scholarship (discovery, integration, teaching, and/or application): Please list citations for the preceding three years.				
External-Peer-Reviewed Publications				
Paper Presentations at Conferences with Refereed Abstract Submissions				
Invited Presentations to Conferences and Meetings				
Other Publications or Presentations				

Service to the graduate program: Please list service on thesis and special project committees as well as other service to the graduate program for the preceding three years.					
Signature of Faculty*		Date:			
*This signature also authorizes the Dean with oversight of the graduate program to access your personnel files to verify the information that you have submitted.					
personner mes to verny the m	normation that you have s	upriiitea.			
APPROVALS					
UNIT	SIGNATURE	DA	TE		
Graduate Program Chair					
Dean					
Director of Graduate Studies					
Entered into Graduate Bull	etin:	(Initial)	(Date)		