## GRADUATE FACULTY APPROVAL FORM

## **Graduate Studies**

	GENERAL I	NFORMATION			
Faculty:			Updated Vita Attached:	☐ Yes	☐ No
Department:			School:		
	Temporary Graduate Faculty (persons who have the expertise in an area that qualifies them to teach a graduate-level course)				
Type of Graduate Faculty:	Permanent Graduate Faculty (persons who have an earned doctorate or other appropriate terminal or professional degree from a or university accredited by a regional accrediting agency; an appointment at the rank of Assistant college Professor or above; and conducted specific forms of scholarly activities in the past five years)				
Perm Grad Faculty Supervisor:			Semester/Year:		
COURSES TO BE TAUGHT (TEMP FACULTY ONLY)					
MOST RECENT REFEREED PUBLICATIONS, CONFERENCE PAPER, OR REVIEW					
Signatures					
Chair Recommendation:		☐ Approva	al 🗌 Disapprova	l Date:	
Dean Recommendation:		☐ Approv	al 🗌 Disapprova	l Date:	
Graduate Council Recommendation: (Permanent Graduate Faculty Only)		☐ Approv	al 🗌 Disapprova	l Date:	
Vice President for Academic Affairs Recommendation:		☐ Approva	al 🗌 Disapprova	l Date:	