



SCHOOL OF  
**MEDICINE &  
DENTISTRY**

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UNIVERSITY *of* ROCHESTER  
MEDICAL CENTER

REQUIRED PAPERWORK FOR  
SMD FACULTY  
PERSONNEL ACTIONS

October 2024

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# General Information

## Office for Academic Affairs Team

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Tammy Michielsen, Director

Provide leadership and support for academic affairs, serving as liaison to University-wide offices, advising on policy and procedures governed by the SMD Regulations of the Faculty and the University Faculty Handbook. [Tammy\\_michielsen@urmc.rochester.edu](mailto:Tammy_michielsen@urmc.rochester.edu) / 585-275-3030

Lori McBride, Manager

Administrative team lead for the appointment, reappointment and promotion process for junior faculty levels, faculty leave of absence, faculty search postings, recruitment forms, and offer letters for all faculty ranks.

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Grace Kane, Faculty Affairs Administrator II

Appointments, reappointments and promotions at senior faculty levels; primary contact for activities of the MEDSAC Steering committee; Promotions and Reappointment Manager (PRM) processes and document review.

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Kelly Chandler, Faculty Affairs Administrator II

Faculty Professionalism Council liaison, manage faculty professionalism incident reporting. Review and processing of voluntary junior faculty appointments, facilitate conflict of interest survey and faculty annual reviews, review and process faculty offer letters, process named professorship appointments.

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JoEllen Gilfus, Administrative Coordinator III

Support administrative needs of the Office of Academic Affairs, primary support for the Vice Dean for Academic Affairs, coordinate and schedule MEDSAC Steering Committee meetings, Provost and Board of Trustee actions, SMD Faculty Council and events for the Office of Academic Affairs. Facilitate web page edits.

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Britney Swanger, Administrative Coordinator III

Support administrative needs of the Office of Academic Affairs, primary support for Administrative Director. Triage and route incoming faculty appointment paperwork for the OAA team, coordinate faculty orientation, professional service reappointment review, web site updates and edits. Review faculty postings and recruitment forms for approval.

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## Office for Academic Affairs – Important Links and Information

- Academic Affairs Homepage: <http://oaa.urmc.edu>
- SMD Regulations of the Faculty: [SMD Regulations of the Faculty](#) (revised October 2017)
- UR Faculty Handbook:  
[http://www.rochester.edu/provost/assets/PDFs/Faculty\\_handbook.pdf](http://www.rochester.edu/provost/assets/PDFs/Faculty_handbook.pdf) (updated October 2021)
- Faculty Roster – Developed and managed by OAA, Faculty Roster is a comprehensive database of faculty appointment information in the School of Medicine & Dentistry. Faculty Roster is used to track and manage all faculty appointments. Contact Tammy Michielsen or Lori McBride for access.
- UR Faculty – Faculty Information System (Powered by Interfolio). A University project with the goal to increase operational efficiencies and data processing, The first of four modules initiated in June 2023, Faculty Search, to facilitate Faculty Postings and Recruitment. Additional modules will be added later 2023 into 2024.
- Recruitment Form: Recruitment forms are required for all full-time or paid part-time faculty (0.5 FTE or greater) positions. The Faculty Recruitment Form is continually revised and updated to reflect current financial data; please ensure you download the current version from the OAA website. Job postings may be processed independently of the recruitment form so the position may be posted to FIS/UR Faculty to begin the mandatory 30-day posting period. See [Recruitment Form and Offer Letter Process](#) for details.
- Offer Letters: All offer letters for paid faculty [full-time (1FTE) and part-time (0.5FTE or greater)], and TAR (.49 FTE or less) *regardless of rank*.
  - Require the signatures of the Department Chair (and Center Director, when applicable) *and* the Dean of the School of Medicine and Dentistry and must utilize the *standard offer letter template and relevant standard terms and conditions document (see your Office of Counsel representative for this template and document)*.
  - All offer letters must be approved by the Office of Counsel prior to forwarding to Academic Affairs.
  - All offer letters must come to the [Office of Academic Affairs](#) who will facilitate Dean review and signature.
  - An approved recruitment form must be on file in Academic Affairs in order for an offer letter to be signed for all offer letters 0.5 FTE or greater.
  - Offer letter templates are found in Box/ Offer Letter Materials – one primary department staff member who facilitate offer letters is granted access. Please be sure to notify the Office of Academic Affairs if/when there needs to be a change in access.

- Drug Screening: A drug screen is required for all new paid faculty (full-time, part-time, and TAR) and some visiting faculty, and anyone who requires a medical staff appointment. The drug screen is included as part of the initial credentialing process for the medical staff appointment. For those *not* requiring a new medical staff appointment, current voluntary faculty member that will now be paid by UR, departments should schedule the drug screening appointment with Employee Health as “research only”. This stipulation is in the Standard Terms of Employment document that all new paid hires agree to when they sign their offer letter. It is the hiring department’s responsibility to facilitate a drug screening appointment for incoming faculty.
- I-9: It is the responsibility of the hiring department to ensure that each candidate completes the I-9 prior to their start date. OAA will verify I-9 completion prior to approving a faculty appointment. Due to the highly confidential nature of the I-9, please do not submit the I-9 or supporting documentation to OAA.
- Faculty Demographics Form: The form can be found at Appendix G; note this form is only for Dean’s Office use and will not be forwarded to the HR Service Center.
- Intellectual Property Agreement Form (IPA): Signed, original IPA should be forwarded to the Office of Research & Project Administration (ORPA, Box 270140); a copy of the IPA should be included with original appointment packet as appropriate. Link to form (*revised 11/2009*): [http://www.rochester.edu/orpa/\\_assets/pdf/form\\_ipa.pdf](http://www.rochester.edu/orpa/_assets/pdf/form_ipa.pdf)
- Explanation of Full-Time vs. Part-Time: Full-Time faculty are 1 FTE (full-time effort) and are entitled to full-time faculty benefits. Part-Time faculty are 0.5 FTE - 0.99 FTE and are entitled to part-time faculty benefits.
- When dropping below 0.5 FTE, the faculty member’s appointment must change to TAR (Time-as-reported). There are statutory limited benefits associated with the TAR rank by which the University must abide. An offer letter or contract is required for faculty changing from full or part-time to a TAR status.
- OAA *may* make an exception to coding a faculty member as TAR, the statutory limitation on benefits remains. Please contact OAA with any questions.
- Promotion and Reappointment Manager System (PRM): *Initial Appointments, Promotions and Reappointments at Senior Faculty ranks* should be submitted via PRM as noted in the relevant sections of the Required Paperwork. PRM should not be used for joint appointments, changes of status, or for faculty whose appointment has lapsed. If a faculty member’s appointment has lapsed, action is possible only after the faculty member’s appointment has been made current. Please contact Grace Kane with questions.

- Template Letters: The OAA website section [For Department Chairs, Center Directors, and Administrators](#), provides several template letters, including:
- A template is available for each possible component combination as follows:
  - [C-S-T \(Clinical, Scholarship and Teaching\)](#)
  - [C-T \(Clinical and Teaching\)](#)
  - [IS-CT \(Institutional Scholarship and Clinical Teaching\)](#)
  - [I-S-T \(Institutional Scholarship and Teaching\)](#)
  - [R-C-T \(Research, Clinical and Teaching\)](#)
  - [RT \(Research and Teaching\)](#)
  - [ST \(Scholarship and Teaching\)](#)

[Template for Chair's Letter Requesting Referee Letters for Promotion/Tenure Packets Template for Chair's Letter to the Dean's Office Proposing Promotion](#)

- Letters of Recommendation: Letters of recommendation should be written by those at the same rank as the proposed rank, or higher. For example, for appointment, reappointment, or promotion to the rank of Associate Professor, recommendations should generally be written by those at the rank of Associate Professor (and above). Any questions should be directed to the Office of Academic Affairs.
- All received letters of recommendation, regardless of content, must be included in the appropriate appointment, promotion, or reappointment packet. Departments may not choose and include only those letters they feel are the most complimentary.
- Internal Referees: Any faculty member with an appointment at the University of Rochester is considered “internal” – this includes all faculty with a “voluntary” appointment and all faculty with appointments in any of the other Schools (Arts, Sciences, & Engineering, Eastman, Nursing, Simon, Warner).
- Joint Faculty Appointments: Per the [SMD Regulations of the Faculty](#) (pg.17), Faculty members may hold full- or part-time appointments in more than one department, ordinarily at the same rank as in the primary department. Joint appointments are functional and not honorific in nature. They are intended to benefit both the faculty member and joint department by enhancing collaboration in teaching, research, clinical programs, and in other activities of the joint department. Reminder that joint appointment end dates may not exceed the term of the primary appointment, and faculty with tenured primary appointments are limited to a three-year term in their secondary appointment(s).
- Voluntary Faculty or Department Fellow Changing to Employed Status: A Faculty Recruitment Form is required for any faculty member moving from a voluntary faculty or departmental fellow position to a paid faculty position at part-time (0.5 FTE) or greater. When moving to a paid faculty position, a completed I-9, an Intellectual Property Agreement (IPA), and a Faculty Demographics Form are required, if not previously submitted.



- Reappointment of Assistant Professor: Reappointment of an Assistant Professor at the completion of the first appointment period requires a preceding departmental review of performance and of the faculty member's contributions as related to specific activity components, i.e., Research, Scholarship, Institutional Scholarship, Clinical, and Teaching, which the department chair and faculty member may have previously selected or are prepared to select for their career development.
- Departmental review is considered one of the more important points in the academic career of junior faculty. *Please see the following pages: 8-9 (SMD Regulations of the Faculty) and Appendix D.* Do note this assessment letter becomes the faculty member's reappointment letter, and they will receive a copy of the letter after the Dean concurs with the reappointment.
- Secondary Faculty appointment for Trainees: For those in ACGME Accredited Fellowships, to be granted a secondary appointment as Instructor, a letter of approval is required from the Office of Compliance allowing the trainee to practice/bill for services outside the scope of the training program. Departments should upload required paperwork supporting the addition or reappointment of a secondary instructor appointment to Academic Affairs in Box so that the secondary appt can be reviewed appropriately.
- Salary source(s) for Research Assistant Professors, Research Associate Professors, and Research Professors: *Faculty in these ranks should not be paid 100% from a GR5 (grant) account.*
- Terminations: *All 510 sending faculty appointments must be signed by the Chair or Center Director and routed to OAA for the signature of the Vice Dean for Academic Affairs.* A letter of resignation is required for any faculty member at the level of Assistant Professor or higher. In the "remarks" section of the 510, please indicate the faculty member's new employer or future plans, if known. See page 27 of the Required Paperwork for further guidance. If the Chair chooses not to reappoint a faculty member, this must be first reviewed with the Vice Dean for Academic Affairs. Letters of non-reappointment should include appropriate notice and be vetted by the Office of Counsel and the Vice Dean for Academic Affairs prior to being presented to the faculty member. Please contact OAA to discuss process and requirements.
- Other Common Issues: Please refer to the [SMD Regulations of the Faculty](#) for guidance on Policy & Procedures for Extending the "Academic Clock", Appointment length by faculty rank, Assistant Professor Appointment length, etc.
- Vacation Payout: Per the Chief Financial Officer of the UR Medical Center, there is no pay out of unused faculty vacation days.
- eCV: All full-time and paid part-time faculty are required to have an eCV. New paid faculty are required to have their CVs in the [eCV database](#) within 30 days of hire. This is required because the faculty webbios on the URM website are fed by the eCV. Please note that many faculty members may prefer to keep a Word document with their full CV; they are strongly encouraged to use the CV template found in the [SMD Regulations of the Faculty, Appendix II](#).
- Medical Staff Appointment: For new faculty requiring a Medical Staff appointment OAA will contact Medical Staff Services to ensure the "file is clear". Academic Affairs will then proceed with the faculty appointment.
  - o Academic Affairs cannot proceed with the faculty appointment until this clearance is received.

## **PROFESSOR, ASSOCIATE PROFESSOR\* and RESEARCH PROFESSOR**

### **INITIAL APPOINTMENT:**

Ad hoc committee review, MEDSAC Steering Committee approval, and Provost approval required for initial appointment. University Board of Trustees approval required for initial appointment with tenure.

*Associate Professor and Professor:* must be appointed on the basis of components (Research, or Scholarship, or Institutional Scholarship, and/or Clinical, and Teaching), national leadership and international reputation, independent funding (principal investigator), peer-reviewed publications (first/senior author), and invited national presentations. These appointments are typically for five years or with tenure, if in tenurable components. Please see pages 9-12 in the *SMD Regulations of the Faculty* for details.

*Research Professor:* must be appointed on the basis of national leadership and international reputation, independent funding (principal investigator), peer-reviewed publications (first/senior author), and invited national presentations. Research Professors may be appointed for one to five years.

*PLEASE SUBMIT ITEMS 1 – 5 to OAA via BOX*

1. Faculty Personnel Appointment Form (PAF 500) – signed/counter signed by appropriate Department Chair(s) and/or Center Director(s). (Please note the HR Posting Number on the form). Note: Research Professors should not be paid 100% from a GR5 (grant) account.
2. Original signed offer letter
3. Employment Eligibility Verification (I-9) form – please ensure the candidate completes the I-9 prior to their start date. OAA will verify I-9 completion with HR. Do not submit the I-9 or supporting information to OAA.
4. Copy of [Intellectual Property Agreement Form](#) – (original IPA should be forwarded to ORPA, Box 270140)
5. Faculty Demographics Form – this form is only for the use of OAA and will not be forwarded to the HR Service Center

*PLEASE SUBMIT ITEMS 6 – 10 VIA the Promotion & Reappointment Manager (PRM)*

6. Department Chair/Center Director recommendation letter (*for Research Professor, letter must identify funding source(s) for salary for the entire appointment period*). (For joint appointment(s) include recommendation letter from appropriate Department Chair/Center Director)
7. Current Curriculum Vitae  
**FOR ITEMS 8 AND 9 – ALL LETTERS OF RECOMMENDATION RECEIVED MUST BE INCLUDED, REGARDLESS OF CONTENT, IN THE APPOINTMENT PACKET.** Letters of recommendation should be written by those at the same rank as the proposed rank, or higher.
8. Internal referee letters (4-8) (*Internal referees are defined as any member of the UR faculty; includes all full-time, part-time, and voluntary faculty*)
9. External referee letters (4-8)
10. Selected reprints of most significant recent publications (3-5 from the last 3 years)

\*The requirements for academic part-time Associate Professors and Professors are the same. Those faculty have previously been designated as such and their efforts are 50% or greater.

## **Promotion and/or Tenure in the Associate Professor\* Professor, Research Professor Ranks**

\*The requirements for academic part-time Associate Professors and Professors are the same. Those faculty have previously been designated as such and their efforts are 50% or greater.

**All require: Ad hoc committee review, MEDSAC Steering Committee approval, Provost approval**  
**In addition,** University of Trustees approval is required for promotions with tenure.

Consideration for promotion to **Associate Professor and Professor** must be based on:

### **At least one Activity Component:**

Research, Scholarship, Institutional Scholarship, and/or Clinical and all require Teaching

**Plus:** Service, Leadership and National/International Recognition

### **Research**

Independent funding (principal investigator) Peer-reviewed publications (first, second author) Invited national presentations

### **To Research Professor**

National leadership and international reputation, **in addition** to list of research requirements above

### **For Promotion with tenure**

Associate Professor: Research or Institutional Scholarship, and/or Clinical and Teaching Professor:

Research, or Scholarship, or Institutional Scholarship and/or Clinical and Teaching

## **MATERIALS**

### **Upload to Box**

Faculty Personnel Action Form (PAF510).

*Research Professors cannot be paid 100% from a GR 5 (grant) account.*

### **Upload to PRM (Promotion and Reappointment Manager)**

#### **1. Department Chair/Center Director recommendation letter**

- Research Professor letters must identify funding source(s) for funding for the entire Appointment period.
- For joint appointments, include recommendation letter from appropriate joint appointment chair/director

#### **2. Current Curriculum Vitae:** Follow URSMD format found in the [SMD Regulations of the Faculty](#), pages 38-40), or eCV format

#### **3. Letters of Recommendation**

Must be from those at the same rank as the proposed rank or higher. All letters received must be submitted with case materials

##### **3a. Internal referee letters (4-8)**

Internal referees are members of the UR faculty, including FT, PT, voluntary

##### **3b. [External referee letters \(4-8\). Use template request letter.](#)**

3c. [External referee relationship to candidate form](#)

**4. Assessment forms**

- Self-Assessment (see [Appendix C](#))
- Self-Assessment of Teaching or Teaching Portfolio
- Peer-Evaluation of Teaching (one is required)
- Self-Assessment of Research, Scholarship, or Institutional Scholarship, as applicable  
(not required for those with Clinical and Teaching components only)
- Self-Assessment of Clinical Contributions (optional for those with Clinical component)
- Self-Assessment of Diversity, Equity & Inclusion (optional for all faculty)

**5. Selected reprints of most significant recent publications (3-5 from last 3 years)**

## **PROFESSOR, ASSOCIATE PROFESSOR\* and RESEARCH PROFESSOR**

### REAPPOINTMENTS:

MEDSAC Steering Committee approval and Provost approval required for reappointment.

(For reappointment terms please see pages 9-12 in the [SMD Regulations of the Faculty](#))

*PLEASE SUBMIT ITEM 1 to OAA via BOX*

1. Faculty Personnel Action Form (PAF510). *Note: Research Professors should not be paid 100% from a GR5 (grant) account.*

*PLEASE SUBMIT ITEMS 2 – 5 VIA the Promotion & Reappointment Manager (PRM)*

2. Department Chair/Center Director recommendation letter or Department Chair/Center Director attestation document (*for Research Professor, letter must identify funding source(s) for salary for the entire appointment period*). (For joint appointment(s) include attestation form from appropriate Department Chair/Center Director)
3. Current Curriculum Vitae—following either UR SMD (see Appendix II of the [SMD Regulations of the Faculty](#), pages 38-40), or eCV Format  
Internal and External referee letters are optional. ALL RECEIVED LETTERS OF RECOMMENDATION MUST BE INCLUDED, REGARDLESS OF CONTENT, IN THE REAPPOINTMENT PACKET. Letters of recommendation should be written by those at the same rank as the proposed rank, or higher.

Note: Internal referees are defined as any member of the UR faculty; includes all full-time, part-time, and voluntary faculty

\*The requirements for academic part-time Associate Professors and Professors are the same. Those faculty have previously been designated as such and their efforts are 50% or greater.

## **PROFESSIONAL SERVICE**

Professor of Clinical and Associate Professor of  
Clinical

## **VOLUNTARY FACULTY**

Clinical Professor and Clinical Associate Professor No-  
Pay, TAR (under 0.5 FTE, % effort must be supplied)

### **INITIAL APPOINTMENT:**

Professor of Clinical, Associate Professor of Clinical, and Clinical Professor: MEDSAC Steering Committee and Provost approval required for initial appointment.

Clinical Associate Professor: Provost approval required for initial appointment.

### *PLEASE SUBMIT ITEMS 1-5 to OAA via BOX*

1. Faculty Personnel Action Form (PAF500) – signed/counter signed by appropriate Department Chair(s) and/or Center Director(s). (Please note the HR Posting Number on the form)
2. Original signed offer letter or professional service contract, e.g., Primary Care contract. (Offer letter is required only if faculty member is to be paid)
3. Employment Eligibility Verification (I-9) form – please ensure the candidate completes the I-9 prior to their start date. OAA will verify I-9 completion with HR. Do not submit the I-9 or supporting information to OAA. Note: the I-9 is not required for voluntary faculty if they are unpaid.
4. Copy of [Intellectual Property Agreement Form](#) – (original IPA should be forwarded to ORPA, Box 270140)
5. Faculty Demographics Form – form is only for the use of OAA and will not be forwarded to the HR Service Center.

### *PLEASE SUBMIT ITEMS 6–8 VIA the Promotion & Reappointment Manager (PRM)*

6. Department Chair recommendation letter (For joint appointment(s) include recommendation letter from appropriate Department Chair(s))
7. Current Curriculum Vitae
8. Referee letters – for Professor 3-5; for Associate Professor 2-4 (May be from either internal or external referee). Note: ALL received letters of recommendation must be included, regardless of content, in the reappointment packet. Letters of recommendation should be written by those at the same rank as the proposed rank, or higher.

## **PROFESSIONAL SERVICE**

Professor of Clinical and Associate Professor of  
Clinical

## **VOLUNTARY FACULTY**

Clinical Professor and Clinical Associate Professor No-  
Pay, TAR(under 0.5FTE, % effort must be supplied)

### **PROMOTIONS:**

Professor of Clinical, Associate Professor of Clinical, and Clinical Professor: MEDSAC Steering Committee and Provost approval required for promotion.

Clinical Associate Professor: Provost approval required for promotion.

*PLEASE SUBMIT ITEM 1 to OAA via BOX*

1. Faculty Personnel Action Form (PAF 510).

*PLEASE SUBMIT ITEMS 2 - 4 VIA the Promotions & Reappointment Manager (PRM)*

2. Department Chair recommendation letter (For joint appointment(s) include recommendation letter from appropriate Department Chair(s))
3. Current Curriculum Vitae—following either UR SMD (see Appendix II of [the SMD Regulations of the Faculty](#), pages 38-40), or eCV format
4. Referee letters - for Professor 3-5; for Associate Professor 2-4 (May be from either internal or external referee). Note: ALL received letters of recommendation must be included, regardless of content, in the reappointment packet. Letters of recommendation should be written by those at the same rank as the proposed rank, or higher.

### **REAPPOINTMENTS:**

Professor of Clinical, Associate Professor of Clinical, Clinical Associate Professor, and Clinical Professor: Provost approval required for reappointment.

*PLEASE SUBMIT ITEM 1 to OAA via BOX*

1. Faculty Personnel Action Form (PAF 510)
2. Current, valid email address for the faculty member

*PLEASE SUBMIT ITEM 3 VIA the Promotion & Reappointment Manager (PRM)*

3. Department Chair recommendation letter OR Chair attestation document (For joint appointment(s) include attestation document from appropriate Department Chair(s))

## **RESEARCH ASSOCIATE PROFESSOR**

### INITIAL APPOINTMENT:

MEDSAC Steering Committee and Provost approval required for initial appointment.

*PLEASE SUBMIT ITEMS 1-5 to OAA via BOX*

1. Faculty Personnel Appointment Form (PAF 500) – signed/countersigned by appropriate Department Chair(s) and/or Center Director(s). (Please note the HR Posting Number on the form in the appropriate spot).
2. Original signed offer letter
3. Employment Eligibility Verification (I-9) form – please ensure the candidate completes the I-9 prior to their start date. OAA will verify I-9 completion with HR. Do not submit the I-9 or supporting information to OAA.
4. Copy of [Intellectual Property Agreement Form](#) – (original IPA should be forwarded to ORPA, Box 270140)
5. Faculty Demographics Form – form is only for the use of the Academic Affairs Office and will not be forwarded to the HR Service Center

*PLEASE SUBMIT ITEMS 6 – 9 VIA the Promotion & Reappointment Manager (PRM)*

6. Department Chair/Center Director recommendation letter – Must include information regarding the funding sources from which the faculty member's salary will be paid throughout the term of the appointment
7. Current Curriculum Vitae  
FOR ITEMS 8 AND 9 – ALL RECEIVED LETTERS OF RECOMMENDATION MUST BE INCLUDED, REGARDLESS OF CONTENT, IN THE REAPPOINTMENT PACKET. Letters of recommendation should be written by those at the same rank as the proposed rank, or higher.
8. Internal referee letters (2-4)
9. External referee letters (2-4)



## **RESEARCH ASSOCIATE PROFESSOR**

### PROMOTIONS:

MEDSAC Steering Committee and Provost approval required for promotion.

*PLEASE SUBMIT ITEM 1 to OAA via BOX*

1. Faculty Personnel Action Form(PAF510).Hard copy must be submitted to the Office of Academic Affairs.  
Note:Research Associate Professors should not be paid100% from aGR5(grant) account.

PLEASE SUBMIT ITEMS 2 – 5 VIA *the Promotion & Reappointment Manager (PRM)*

2. Department Chair/Center Director recommendation letter – Must include information regarding the funding sources from which the faculty member’s salary will be paid throughout the term of the appointment
3. Current Curriculum Vitae–following either UR SMD(see Appendix II of the [SMD Regulations of the Faculty](#), pages38-40), or eCV format  
FOR ITEMS 4 AND 5 – ALL RECEIVED LETTERS OF RECOMMENDATION MUST BE INCLUDED, REGARDLESS OF CONTENT, IN THE REAPPOINTMENT PACKET. Letters of recommendation should be written by those at the same rank as the proposed rank, or higher.
4. Internal referee letters(2-4)
5. External referee letters(2-4)

### REAPPOINTMENTS:

Provost approval required for reappointment

*PLEASE SUBMIT ITEM 1 to OAA via BOX*

1. FacultyPersonnelActionForm(#510).Note:ResearchAssociateProfessorsshould not bepaid 100% froma GR 5 (grant) account.

PLEASE SUBMIT ITEM 2 VIA *the Promotion & Reappointment Manager (PRM)*

2. Department Chair/Center Director recommendation letter OR Chair/Center Director attestation document – Must include information regarding the funding sources from which the faculty member’s salary will be paid throughout the term of the appointment
3. Letters of recommendation (internal or external) are optional forreappointment

**For the appointments on the following pages (pages 19-28), all documents must be submitted to the Office of Academic Affairs electronically via BOX. The Promotion and Reappointment Manager (PRM) is not currently used for these appointments. Please contact OAA with questions.**

ASSISTANT PROFESSOR  
(Full-Time or Part-Time)

Submit all documents to the Office of Academic Affairs *via* **BOX**.

INITIAL APPOINTMENT

1. Faculty Personnel Appointment Form (PAF 500) – signed/countersigned by appropriate Department Chair(s) and/or Center Director(s). (Please note the HR Posting Number on the form)
2. Original signed offer letter
3. Employment Eligibility Verification (I-9) form – please ensure the candidate completes the I-9 prior to their start date. OAA will verify I-9 completion with HR. Do not submit the I-9 or supporting information to OAA.
4. Copy of [Intellectual Property Agreement Form](#) – (original IPA should be forwarded to ORPA, Box 270140)
5. Faculty Demographics Form – form is only for the use of the Academic Affairs Office and will not be forwarded to the HR Service Center
6. Completed [Faculty Recommendation Form](#)
7. Department Chair/Center Director recommendation letter. (For joint appointment(s) include recommendation letter from appropriate Department Chair(s))
8. Current Curriculum Vitae
9. Referee letters are optional:
  - If letters are requested, past rules apply
    - Letters may be internal or external and written by those at the same rank as the proposed rank of the candidate or higher
    - Any letters received must be submitted to OAA for processing of the appointment

PROMOTIONS

10. Faculty Personnel Action Form (PAF 510)
11. Completed [Faculty Recommendation Form](#)
12. Department Chair/Center Director recommendation letter. (For joint appointment(s) include recommendation letter from appropriate Department Chair(s))
13. Current Curriculum Vitae– following either URSMD (see Appendix II of the [SMD Regulations of the Faculty](#), pages 38-40), or eCV format
14. Referee letters are optional:
  - If letters are requested, past rules apply
    - Letters may be internal or external and written by those at the same rank as the proposed rank of the candidate or higher
    - Any letters received must be submitted to OAA for processing of the appointment

**ASSISTANT PROFESSOR**  
**(Full Time or Part-Time)**

Submit all documents to the Office of Academic Affairs *via BOX*

**REAPPOINTMENTS:**

1. Faculty Personnel Action Form (PAF510)
2. Completed [Faculty Recommendation Form](#)
3. Department Chair/Center Director recommendation letter for reappointment following format of templates provided on the OAA webpage—see [Appendix E](#) of Required Paperwork and refer to pages 8 and 9 in the [SMD Regulations of the Faculty](#) as well as [Appendix D](#) for further information on the departmental evaluation of Assistant Professors. (For joint appointment(s) include recommendation letter or attestation form from appropriate Department Chair(s)).
  - i. Additionally, the Department Chair/Center Director recommendation letter must include the Deans concurrence sentence, at the end of the letter, with the appropriate components, to be signed by the Dean, School of Medicine & Dentistry.
4. Current Curriculum Vitae—following either UR SMD (see Appendix II of the [SMD Regulations of the Faculty](#), pages 38-40), or eCV format
  - Referee letters are optional:
    - If letters are requested, past rules apply
      - Letters may be internal or external and written by those at the same rank as the proposed rank of the candidate or higher
      - Any letters received must be submitted to OAA for processing of the appointment

## **RESEARCH ASSISTANT PROFESSOR**

Submit all documents to the Office of Academic Affairs *via* **BOX**.

### **INITIAL APPOINTMENT:**

1. Faculty Personnel Appointment Form (PAF500)–signed/counter signed by appropriate Department Chair(s) and/or Center Director(s). (Note the HR Posting Number on the form). *Note: Research Assistant Professors should not be paid 100% from a GR 5 (grant) account.*
2. Original signed offer letter
3. Employment Eligibility Verification (I-9) form – please ensure the candidate completes the I-9 prior to their start date. OAA will verify I-9 completion with HR. Do not submit the I-9 or supporting information to OAA.
4. Copy of [Intellectual Property Agreement Form](#)–(original IPA should be forwarded to ORPA, Box 270140)
5. Faculty Demographics Form–form is only for the use of OAA and will not be forwarded to the HR Service Center
6. Completed [Faculty Recommendation Form](#)
7. Department Chair/Center Director recommendation letter–Must *include information regarding the funding sources from which the faculty member’s salary will be paid throughout the term of the appointment*
8. Current Curriculum Vitae
9. Referee letters are optional:
  - If letters are requested, past rules apply
    - Letters may be internal or external and written by those at the same rank as the proposed rank of the candidate or higher
    - Any letters received must be submitted to OAA for processing of the appointment

### **PROMOTIONS:**

1. Faculty Personnel Action Form (PAF510). *Note: Research Assistant Professors should not be paid 100% on a GR 5 account.*
2. Completed [Faculty Recommendation Form](#)
3. Department Chair/Center Director recommendation letter– Must include information regarding the funding sources from which the faculty member’s salary will be paid throughout the term of the appointment
4. Current Curriculum Vitae – following either UR SMD (see Appendix II of the [SMD Regulations of the Faculty](#), pages 38-40), or eCV format

### **REAPPOINTMENTS:**

1. Faculty Personnel Action Form (PAF510) *Note: Research Assistant Professors should not be paid 100% from a GR 5 (grant) account.*
2. Department Chair/Center Director recommendation letter– Must include information regarding the funding sources from which the faculty member’s salary will be paid throughout the term of the appointment.

**ASSISTANT PROFESSOR OF CLINICAL**  
**SENIOR INSTRUCTOR**  
**SENIOR INSTRUCTOR OF CLINICAL**  
**INSTRUCTOR**  
**INSTRUCTOR OF CLINICAL**  
**SENIOR ASSOCIATE, ASSOCIATE, AND**  
**ASSISTANT (Full-time and part-time)**

Submit all documents to the Office of Academic Affairs *via* **BOX**.

**INITIAL APPOINTMENT:**

1. Faculty Personnel Appointment Form(PAF500)– signed/counter signed by appropriate Department Chair(s) and/or Center Director(s). (Note the HR Posting Number on the form)
2. Original signed offer letter (non-AC GME fellow offer letter for Instructors with fellowships)
3. Employment Eligibility Verification (I-9) form – please ensure the candidate complete the I-9 prior to their start date. OAA will verify I-9 completion with HR. Do not submit the I-9 or supporting information to OAA.
4. Copy of [Intellectual Property Agreement Form](#)–(original IPA should be forwarded to ORPA, Box 270140)
5. Faculty Demographics Form – form is only for the use of the Academic Affairs Office and will not be forwarded to the HR Service Center
6. Completed [Faculty Recommendation Form](#)
7. Department Chair/Center Director recommendation letter.(For joint appointment(s) include recommendation letter from appropriate Department Chair(s))
8. Current Curriculum Vitae

**PROMOTIONS:**

1. Faculty Personnel Action Form (PAF510)
2. Completed [Faculty Recommendation Form](#)
3. Department Chair/Center Director Recommendation letter.(For joint appointment(s) include recommendation letter from appropriate Department Chair(s))
4. Current Curriculum Vitae–following either UR SMD(see Appendix II of the [SMD Regulations of the Faculty](#), pages 38-40), or eCV format

**REAPPOINTMENTS:**

1. Faculty Personnel Action Form(#510) –Include copy of signed professional service contract, when relevant.

## VOLUNTARY FACULTY

Clinical Assistant Professor, Clinical Senior Instructor, Clinical Instructor,  
Clinical Associate, and Clinical Assistant  
No-Pay, TAR (under 0.5FTE, % effort must be supplied)

Submit all documents to the Office of Academic Affairs *via* **BOX**.

### INITIAL APPOINTMENT:

1. Faculty Personnel Appointment Form (PAF 500) – Must be signed/counter signed by appropriate Department Chair(s) and/or Center Director(s). (Note the HR Posting Number on the form, if appropriate).
2. Original signed offer letter (required only if the faculty member will be paid).
3. Only if a paid appointment: please ensure the candidate completes the I-9 prior to their start date. OAA will verify I-9 completion with HR. Do not submit the I-9 or supporting information to OAA. If unpaid: the I-9 is not required.  
Note: If there is any possibility of the faculty member receiving any salary, compensation, honorarium, etc., the I-9 is mandated.
4. Completed [Faculty Recommendation Form](#)
5. Department Chair/Center Director recommendation letter – Must be signed/countersigned by appropriate Department Chair(s) and/or Center Director(s). For joint appointment(s), include recommendation letter from appropriate Department Chair(s) and/or Center Director(s).
6. Current Curriculum Vitae

### PROMOTIONS:

1. Faculty Personnel Action Form (PAF 510)
2. Completed [Faculty Recommendation Form](#)
3. Department Chair/Center Director recommendation letter – Must be signed/countersigned by appropriate Department Chair(s) and/or Center Director(s). For joint appointment(s), include recommendation letter from appropriate Department Chair(s) and/or Center Director(s).
4. Current Curriculum Vitae – following either UR SMD (see Appendix II of the [SMD Regulations of the Faculty](#), pages 38-40, or eCV format.

### REAPPOINTMENTS:

1. Faculty Personnel Action Form (PAF 510)
2. Current, valid email address for the faculty member

## **JOINT APPOINTMENTS**

Joint faculty appointments *cannot exceed* the term of the primary faculty appointment.

For tenured faculty, joint appointments *cannot exceed* a three-year term.

Professor and Associate Professor  
Research Professor and Research Associate Professor  
(*Full-time and part-time*)

Clinical Professor and Clinical Associate Professor  
(*Voluntary*)

(Provost approved appointments)

Submit all documents to the Office of Academic Affairs *via BOX*.

### **INITIAL APPOINTMENT:**

1. Faculty Personnel Action Form (PAF500 or PAF510) - Must be signed by both the primary Department Chair and the secondary Department Chair(s) and/or Center Director(s)
2. Completed [Faculty Recommendation Form](#)
3. Joint Department Chair/Center Director recommendation letter - Must be signed by both the primary Department Chair and the secondary Department Chair(s) and/or Center Director(s)
4. Current Curriculum Vitae - following either UR SMD (see Appendix II of the [SMD Regulations of the Faculty](#), pages 38-40), or eCV format

### **REAPPOINTMENTS:**

1. Faculty Personnel Action Form (PAF510) - Must be signed by both the primary Department Chair and the secondary Department Chair(s) and/or Center Director(s)
2. Joint Department Chair/Center Director attestation document.



## **JOINT APPOINTMENTS**

Joint faculty appointments *cannot exceed* the term of the primary faculty appointment.

Assistant Professor, Assistant Professor of Clinical, Research Assistant Professor Senior  
Instructor, Senior Instructor of Clinical  
Instructor, Instructor of Clinical Senior  
Associate, Associate, Assistant  
(*Full-time and Part-time*)

Clinical Assistant Professor, Clinical Senior Instructor, Clinical Instructor (*Voluntary*)

Submit all documents to the Office of Academic Affairs *via BOX*.

### **INITIAL APPOINTMENT:**

1. Faculty Personnel Action Form (PAF500 or PAF510) -Must be signed by both the primary Department Chair and these secondary Department Chair(s) and/or Center Director(s)
2. Completed [Faculty Recommendation Form](#)
3. Joint Department Chair/Center Director recommendation letter – Must be signed by both the primary Department Chair and the secondary Department Chair(s) and/or Center Director(s)

### **REAPPOINTMENTS:**

1. Faculty Personnel Action Form (PAF510) -Must be signed by both the primary Department Chair and these secondary Department Chair(s) and/or Center Director(s)
2. Joint Department Chair/Center Director attestation document.

## **ADJUNCT and VISITING FACULTY APPOINTMENTS**

(At any faculty rank)

Submit all documents to the Office of Academic Affairs *via* **BOX**.

### INITIAL APPOINTMENT:

1. Faculty Personnel Appointment Form (PAF 500) – Must be signed/countersigned by appropriate Department Chair(s) and/or Center Director(s). (Note the HR Posting Number on the form, if appropriate).
2. Only if a paid appointment: please ensure the candidate completes the I-9 prior to their start date. OAA will verify I-9 completion with HR. Do not submit the I-9 or supporting information to OAA.  
If unpaid: I-9 completion is not required.  
Note: If there is any possibility of the faculty member receiving any salary, compensation, honorarium, etc., the I-9 is mandated.
3. [Intellectual Property Agreement \(IPA\) Form](#) or [Visiting Scientist Agreement \(VSA\)](#). The original IPA or VSA should be forwarded to ORPA (Box 270140), and a copy provided to the Office of Academic Affairs.  
If the faculty member will be participating in University research using significant University Resources (defined [here](#)), the VSA is required.  
If the faculty member's involvement is solely teaching, clinical, or research not involving significant University Resources, the IPA or VSA is not required. It is the responsibility of the Department Chair to make this determination. The University's policy on Significant Use of University Resources and Intellectual Property Ownership is available [here](#).  
*Examples:*  
Dr. Smith, a physician in private practice, will teach a skills course for three hours. No IPA or VSA is required. Dr. Jones, a staff physician at Alpha Hospital in Anywhere, NY, will refer patients to a clinical trial being performed at the University of Rochester. Dr. Jones has no role in the trial, he is simply referring patients. No IPA or VSA is required.  
Dr. Nobel, a faculty member at Science University in Anyplace, MA, will collaborate on a research project with Dr. Investigator at the University of Rochester. As part of this collaboration, Dr. Nobel will use the University's multi photon core and specialized microscopes. The VSA is required.
4. Completed [Faculty Recommendation Form](#)
5. Department Chair/Center Director recommendation letter – Must be signed/countersigned by appropriate Department Chair(s) and/or Center Director(s). For joint appointment(s), include recommendation letter from appropriate Department Chair(s) and/or Center Director(s).
6. Current Curriculum Vitae
7. For Visiting Faculty, not paid by UR, proof of health insurance must be provided.
8. For Adjunct Associate Professor and Adjunct Professor: Provide 1-2 referee letters (may be internal or external referees). Note: Letters of recommendation should be written by those at the same rank as the proposed rank, or higher

**ADJUNCT and VISITING FACULTY**  
**APPOINTMENTS (At any faculty rank)**

Submit all documents to the Office of Academic Affairs *via BOX*.

PROMOTIONS (Adjunct Faculty only):

Adjunct Faculty:

1. Faculty Personnel Action Form (PAF510)
2. Completed [Faculty Recommendation Form](#)
3. Department Chair/Center Director recommendation letter–Must be signed/counter signed by appropriate Department Chair(s)and/or Center Director(s).For joint appointment(s), include recommendation letter from appropriate Department Chair(s) and/or Center Director(s).
4. Current Curriculum Vitae–following either UR SMD(see Appendix II [of the SMD Regulations of the Faculty](#), pages 38-40), or eCV format.

REAPPOINTMENTS:

Adjunct Faculty:

1. Faculty Personnel Action Form(PAF510)-Must be signed/countersigned by appropriate Department Chair(s) and/or Center Director(s).
2. Adjunct Instructor through Adjunct Assistant Professor - either a Department Chair/Center Director recommendation letter or the [Adjunct Faculty Reappointment Form](#) (see Appendix B)
3. Adjunct Associate Professor and Adjunct Professor - Department Chair/Center Director recommendation letter and the [Adjunct Faculty Reappointment Form](#) (see Appendix B)

Visiting Faculty:

1. Faculty Personnel Action Form(#510)-Must be signed/countersigned by appropriate Department Chair(s) and/or Center Director(s).
2. Department Chair/Center Director recommendation letter-Must be signed/counter signed by appropriate Department Chair(s) and/or Center Director(s).

## **EMERITUS**

- Emeritus designation granted upon or post-retirement
- Professor Emeritus or Clinical Professor Emeritus Faculty select one of the following: Emeritus, Emerita, or Emeritx
- Subject to Board of Trustees approval
- Faculty should contact Total Rewards to understand benefits with a change in appointment status.

### **REQUIRED PAPERWORK FOR ALL EMERITUS APPOINTMENTS**

1. Completed Faculty Recommendation Form
2. Department Chair/Center Director recommendation letter – signed by appropriate chair/center director
3. Faculty current CV

### **PERSONNEL FORMS (510 and/or 500 forms REQUIRED AS FOLLOWS)**

#### **A. Retire from paid appt, no rehire**

1. 510 to retire primary record
2. Run 500 form to create new record for no pay Emeritus appointment (Job Code 0123)
  - a. Effective date is first date of retirement
  - b. Functional title Professor Emeritus/Emerita/Emeritx
  - c. No end date

#### **B. Retire from paid appt/Rehire as TAR**

1. Process 510 to retire on primary record
2. Process 500 form to create new EMPL record, for no pay Emeritus appt (Job Code 0123)
  - a. Effective date is date first of retirement
  - b. Functional title Professor Emeritus/Emerita/Emeritx
  - c. No end date
3. Create 500 form to create 2<sup>nd</sup> **new** EMPL record, for paid (TAR) appointment (Job Code 0124) – Professor (part-time)
  - a. Annual compensation letter required for TAR appt, with pay and terms of employment (start/end dates)
  - b. TAR appt needs a start and end date

#### **C. Emeritus status post retirement**

1. Do not alter the primary (retirement) record
2. Process 500 form to create new record for no pay Emeritus/Emerita/Emeritx appointment
  - a. Job code 0123
  - b. Functional title
3. **If** there is a paid TAR appt in place,
  - a. 510 to Term TAR EMPL record if that appt is ending, OR
  - b. Maintain TAR appt and terminate when the TAR appt ends

#### **D. Voluntary faculty with no pay appointment**

(Faculty member retires from private practice)

Dept decides to grant Emeritus status (unpaid)

Dept runs PAF and shows change to Clinical Professor Emeritus (0123)

## **CHANGE OF STATUS**

**(All faculty ranks)**

Change in Time status(change to or from, full-time, part-time, time-as-reported,or no pay).

Provost approval required for all senior faculty change in status

Submit all documents to the Office of Academic Affairs *via* **BOX**.

1. Faculty Personnel Action Form(PAF 510)–signed/counter signed by appropriate Department Chair(s) and/or Center Director(s) with the appropriate faculty action noted.
2. Chair’s letter requesting the change, which must include an explanation for the change request.
3. Documentation of the faculty member’s request for the change.
4. Letter from the Department Chair to the faculty member providing appropriate notice of change and describing the change in appointment and compensation.

Note:

- For change from time-as-reported to either a part-or full-time appointment a faculty recruitment form is required. Check with OAA if the new appt is less than a year in length.
- For changes from time-as-reported to either part-or full-time OR from part or full time to TAR a faculty offer letter or contract is required.

Faculty to Trainee:

1. Faculty Personnel Action Form(PAF#510)–signed/counter signed by appropriate Department Chair(s) and/or Center Director(s) with the appropriate action noted.

Note:

- For changes from Faculty to Trainee, Vice Dean for Academic Affairs signature is required.
- Trainees becoming faculty are considered new hires, and the appropriate paperwork for initial appointment at the hire rank should be submitted

For other types of changes(i.e. from Research Assistant Professor to Assistant Professor or from Associate Professor to Associate Professor of Clinical), please contact OAA to determine appropriate paperwork.

## **TERMINATIONS/DEPARTURES**

(All paid time-as-reported, part-time or full-time faculty ranks)

*ALL paperwork to end a faculty appointment must be submitted to OAA via BOX.*

Resignation/Retirement:

1. Faculty Personnel Action Form (PAF510)–signed by appropriate Department Chair(s) and/or Center Director(s) with the appropriate termination date.
2. [Completed signed Faculty Departure Form](#)

Non-reappointments:

1. Faculty Personnel Action Form (PAF510)– signed by appropriate Department Chair(s) and/or Center Director(s) with the appropriate termination date.
2. Copy of non-reappointment letter given to faculty member with appropriate notice (letter should be vetted by Office of Counsel and the Senior Associate Dean for Academic Affairs prior to being presented to faculty member). Please contact OAA to discuss process and requirements.
3. [Completed signed Faculty Departure Form](#)

Death:

1. Faculty Personnel Action Form (PAF510)–signed by appropriate Department Chair(s) and/or Center Director(s) with the appropriate termination date.
2. Copy of obituary or death notice.
3. Departments should advise family members to contact benefits as soon as possible.

## **ENDING OF APPOINTMENTS**

(Voluntary or no-pay appointments, including visiting and adjunct appointments)

1. Faculty Personnel Action Form (PAF#510)–signed/counter signed by appropriate Department Chair(s) and/or Center Director(s) with the appropriate termination date.

# **APPENDICES – A THROUGH J**

**UNIVERSITY OF ROCHESTER SCHOOL OF MEDICINE AND DENTISTRY**  
**Faculty Recommendation Form**

Candidate's Name:	
Department:	Division:
	Date of Birth:
Employee ID Number:	Citizenship:

Proposed Action (check all that apply):

Appointment <input type="checkbox"/>	Change in Appointment <input type="checkbox"/>
Reappointment <input type="checkbox"/>	Additional Appointment <input type="checkbox"/>
Promotion <input type="checkbox"/>	Grant Tenure <input type="checkbox"/>

**PRIMARY APPOINTMENT**

Current Title:	
Proposed Title:	
Effective Date:	End Date:

**Specify Activity Components for Professor, Associate Professor, and Assistant Professor (reappointment):**

Clinical	Research	Scholarship	Institutional Scholarship	Teaching
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

only one of these may be selected

**JOINT APPOINTMENT(S)** (for more than one joint appointment, attach second sheet)

Current Title:	
Proposed Title:	
Effective Date:	End Date:

**Remarks**



**Appendix B**

**ADJUNCT FACULTY REAPPOINTMENT FORM**

Name \_\_\_\_\_

Home Address \_\_\_\_\_

Primary Institution Affiliation \_\_\_\_\_

Title/Rank at Primary Institution \_\_\_\_\_

Business Address \_\_\_\_\_

Email \_\_\_\_\_

End Date of Current Adjunct Appointment \_\_\_\_\_

- 1) Time spent teaching in the School of Medicine and Dentistry
  - a. Course(s)
  - b. Dates of participation
  - c. Hours
  
- 2) Time spent on-site doing research.
  - a. Grants on which you are named principal investigator and faculty at the University of Rochester are named co-investigator (include title, agency, and grant period)
  
  - b. Grants on which you are named co-investigator (include title, agency, and grant period)
  
  - c. Other research collaborations
  
- 3) Other on-site activities
  
- 4) Comments

# APPENDIX C

- i. Faculty Member's Self-Assessment of Contribution to  
Diversity, Equity, and Inclusion (DEI)
- ii. Evaluation of Faculty Contributions to Teaching
- iii. Faculty Member's Self-Assessment of Clinical  
Contributions
- iv. Faculty Member's Self-Assessment of Research and/or  
Other Scholarly Contributions

## **APPENDIX C-i**

### **Faculty Member's Self- Assessment of Contributions to Diversity, Equity, and Inclusion**

*(Optional for all senior academic promotions)*

Name of Candidate: \_\_\_\_\_

## **DIVERSITY, EQUITY AND INCLUSION**

### **Faculty Member's Self-Assessment of Contributions to Diversity, Equity, and Inclusion Limiting**

your comments to one page, please describe your contributions to diversity, equity, or inclusion (DEI). These contributions may include any of the activity domains listed on your CV or outlined in the SMD Regulations of the Faculty, including clinical contributions, teaching and education, research or other forms of scholarship, community engagement, or service/leadership/national recognition.

Describe your DEI contributions in terms of content area, collaborators or constituents, approach, or methods.

Describe evidence for the quality of your DEI contributions, which may include: formal assessments from collaborators or constituents; quality or productivity metrics's applicable; or regional, national, or international recognition for your expertise or achievements.

## **APPENDIX C-ii**

### **Evaluation of Faculty Contributions to Teaching**

*(Required for all senior academic promotions)*

Name of Candidate: \_\_\_\_\_

## TEACHING

### Evaluation of Faculty Contributions to

#### Teaching: Outline for Compilation

##### Essential Elements:

1. Faculty Member's Self-Assessment.
2. Peer Evaluation by faculty member(s), based on direct observation. Evaluators may choose to use the Peer Evaluation of Faculty Contributions to Teaching form (below), or the evaluation may take the form of a referee letter.
3. Written materials (syllabi, special initiatives, reports, etc.) pertaining to education.
4. Summary of student, resident, graduate student evaluations, obtained from data collected by the Offices for Medical Education or Graduate and Postdoctoral Education office, as appropriate.
5. Letter of recommendation from Department Chair/Center Director must include a summary of the quantity and quality of the faculty member's teaching.

Name of Candidate: \_\_\_\_\_

## TEACHING

### Faculty Member's Self-Assessment of Teaching Contributions

Please discuss each item; limit your comments to one page.

1. Describe your involvement in teaching and education, which may include any or all of the following: direct teaching (describe learners / context); assessments of learners; curriculum development; mentoring and advising; or educational leadership and administration. For each activity, please convey the nature of your work beyond that portrayed on your CV.

2. Describe your approach to education, supported by educational principles that underlie your teaching and your experience with how people learn. What are your teaching objectives, strategies, and methods? If you have opted to *not* include an educator portfolio, please submit sample syllabi, lecture handouts, or other similar materials as applicable to convey the nature of your teaching.

Name of Candidate \_\_\_\_\_

: Name of Evaluator: \_\_\_\_\_

## TEACHING

Peer Evaluation of Faculty Contributions to Teaching Peer

Evaluation by faculty member(s), based on direct observation.

An excellent teacher is enthusiastic, knowledgeable and capable of conveying key information in an engaging, challenging manner which invites questions. Such an individual is responsible for timely feedback and when serving as an advisor, commits to responsible on going over sight of the progress of the student's development. Please provide a commentary considering these and other points which will specifically identify the quality of the candidate's teaching. Limit comments to one page. Evaluators may choose to use this form, or the evaluation may taken the form of reference letter.



## **APPENDIX C-iii**

### **Faculty Member's Self-Assessment of Clinical Contributions**

*(Optional for all senior academic promotions in the Clinical activity  
component)*

Name of Candidate: \_\_\_\_\_

## CLINICAL

### Faculty Member's Self-Assessment of Clinical Contributions

Limiting your comments to one page, please describe your clinical contributions (broadly defined as in the SMD Regulations of the Faculty to include patient care or other professional services).

You may describe direct patient care, collaborative care (including consultations or team-based care), administration/leadership of clinical teams/sites/systems, practice improvement projects with demonstrable improvement, support or ancillary systems or services (e.g., medical informatics, public/community health), development and testing of assessment tools, or other activities as relevant to other types of professional service (e.g., clinical laboratory scientists, radiation physicists, sociologists, psychological assessments, or others including community engagement or efforts to foster equity, diversity, or inclusion).

Describe your area of clinical expertise and activity as defined by content area, populations served, approach, or methods. Describe the time/effort you spend on these activities.

Describe evidence for the quality of your clinical contributions, which may include: formal assessments from peers, patients, families, or others; quality or productivity metrics as applicable to your field; or regional, national, or international recognition for your expertise or achievements.

## **APPENDIX C-iv**

### **Faculty Member's Self-Assessment of Research and/or Other Scholarly Contributions**

*(Required for all senior academic promotions in the activity components of  
Research, Scholarship, or Institutional Scholarship)*

Name of Candidate: \_\_\_\_\_

**RESEARCH/SCHOLARSHIP/INSTITUTIONAL SCHOLARSHIP**

Faculty Member's Self-Assessment of Research and/or Other Scholarly Contributions

A self-assessment of published work assists reviewers by providing the candidate's perceptions and by serving as a starting point for the reviewers' evaluations. Please select up to five (5) papers or other scholarly products; for each, summarize in two to three sentences the specific contribution each has made to the advancement of the field. The citations and the annotation for each should be single-spaced; the resultant self-assessment should be limited to one page.

**Appendix D** (updated July 2014)

Date: July 1, 2014  
To: Department Chairs and Center Directors  
From: Jeffrey M. Lyness, MD  
Re: Procedure for Evaluation of Assistant Professor Prior to First Reappointment

In 2002, the Dean's Office instituted the process for conducting the required review of assistant professors at the end of their first term, and for communicating this evaluation to individual faculty. At that time, the Dean's Office, Department Chairs, and Center Directors agreed that such letters are to be prepared by chairs, center directors (or both when appropriate) since they are most familiar with the faculty member's academic accomplishments, professional contributions, and plans for the future. This plan was initiated on October 1, 2002, with the sequence of steps outlined as follows:

- During the last year of the initial appointment (i.e. the third or fourth year), the faculty member should meet with the Chair (Center Director or both) for a detailed review of his or her academic progress. It may be desirable, when appropriate, to include the relevant Unit or Division Chief in such a meeting. The review should incorporate internal (departmental) review of the quality of the faculty member's efforts, drawing on the faculty member's prior annual reviews by the Chair or Chair-designee.
- An up-to-date copy of the candidate's CV, and a minimum of three letters of recommendation (usually internal) should be obtained.
- The Chair (and Center Director) should prepare a summary letter, addressed to the Vice Dean for Academic Affairs (VDAA), which should include the following elements:
  - ✓ A brief description of the candidate's graduate educational background, specialty training, research training, board certification and experience, as appropriate.
  - ✓ A brief description of the faculty member's original goals and responsibilities, based on the original offer letter, and his/her subsequent activities in the areas of education, research, clinical and/or administrative service, as appropriate.
  - ✓ An assessment of the candidate's academic achievements, professional contributions, progress in achieving his/her goals, and success in integrating his/her activities within the department or center. This critical assessment should be done in the context of the candidate's chosen activity components (i.e., Research, Scholarship, Institutional Scholarship, Clinical, Teaching), which, as you know, must be specified at this time, at the latest.
  - ✓ A final paragraph summarizing the candidate's performance to date. This summary should also include, when warranted, specific recommendations to the candidate for further actions in any area of academic endeavor that should be pursued during the

second term of his/her appointment to assure subsequent promotion based on excellence in the designated components.

- ✓ The letter should conclude with a sentence recommending reappointment and, in addition to the chair's signature, should include a line for the Dean's signature. In accordance with our *Regulations of the Faculty*, the letter must show that the candidate is to receive acopy.
  
- The entire reappointment packet should then be sent to the SADAA. If, after review, the SADAA concurs with the evaluation, he/she will present the letter to the Dean for signature. Should the SADAA have questions or disagreements with any aspect of the chair's letter, such issues should be resolved, and changes made, as appropriate, prior to presenting the letter to the Dean for signature.

Over the past months, these letters have less and less often included all these items. For academic, legal, and human resource reasons, it is very important to consistently adhere to this format. Thank you very much for your cooperation and for your assistance with this.

## **Appendix E:**

### **Templates for Chair's Letter to the Dean's Office Proposing Reappointment as Assistant Professor**

- i. C-S-T (Clinical, Scholarship and Teaching)**
- ii. C-T (Clinical and Teaching)**
- iii. IS-CT (Institutional Scholarship and Clinical Teaching)**
- iv. IS-T (Institutional Scholarship and Teaching)**
- v. R-C-T (Research, Clinical and Teaching)**
- vi. R-T (Research and Teaching)**
- vii. S-T (Scholarship and Teaching)**

## Template for Chair's Letter to the Dean's Office Proposing Reappointment as Assistant Professor (CST)

Dear Dr. Baumhauer,

I am writing to propose the reappointment of [faculty member's name] as Assistant Professor of [Department] based on [her/his] excellence in the anticipated components of Clinical, Scholarship, and Teaching, for a term of [two or three] years.

[summary of faculty member's background and training, and current roles in the Department, URM, regionally/nationally if appropriate]

[separate paragraphs describing excellence in each anticipated activity component — recognizing that, at the time of reappointment as Assistant Professor, their accomplishments in each area are typically still emerging and do not yet fully meet the criteria for promotion in rank — using language as follows]

*Scholarship:* [summarize evidence for (non-Research) scholarship “demonstrating a developed, in- depth approach of the highest quality to an area of focused interest,” as evidenced by [specific points from Regulations of the Faculty Appendix Ic]].

*Clinical:* [summarize evidence for “specialized professional services of the highest quality in patient care or other aspects of URM missions” as evidenced by [specific points from Regulations of the Faculty Appendix Ic]] It is most helpful to provide descriptions of the nature of the faculty member's expertise and professional services, including a general sense of how much time/effort they spend on their clinical practice. As applicable, it also is helpful to provide metrics or other relatively objective evidence regarding the quality, innovation, or impact of the faculty member's clinical activities.

*Teaching:* [summarize evidence for “excellence in teaching contributions,” broadly defined, as evidenced by [specific points from Regulations of the Faculty Appendix Ic]] It is helpful to provide descriptions of the faculty member's primary educational responsibilities, including a general sense of how much time/effort they spend on these. As applicable, it also is helpful to provide metrics or other relatively objective evidence regarding the quality, innovation, influence, or impact of the faculty member's educational activities.

*Service, Leadership, & National Recognition:* [summarize evidence for the faculty member “using her/his expertise and skills in any of the above components to the benefit of their department, the SMD, the University, and/or their field or discipline,” which may include leadership at local, regional, national, or international levels depending on career path, as evidenced by [specific points from Regulations of the Faculty Appendix Ic]]

*[Please note that the faculty member's professional efforts working with the community, or fostering diversity, equity, or inclusion, should be described as applicable to their activity components and/or as part of their service or leadership to the institution or field]*

In recommending this faculty member for academic reappointment, *[this faculty member has consistently demonstrated behaviors in keeping with our professionalism values, standards, and expectations] or [any significant professionalism concerns have been remediated to a degree sufficient to make this recommendation].*

*[Also please note that quotations from referee letters either should not be used, or should be used in de-identified form, because the faculty member will receive a copy of this letter after it is finalized.]*

[Close with summary paragraph, restating the proposed reappointment, anticipated components, and term]

[chair signature]

I concur with the above reappointment based on excellence in the anticipated components of Clinical, Scholarship, and Teaching, effective [effective date] through [end date]



---

David C. Linehan, MD  
CEO, University of Rochester Medical Center  
Dean, School of Medicine and Dentistry  
Senior Vice President for Health Sciences

Alternate language for faculty with expiring work authorization:

I concur with the above reappointment based on excellence in the anticipated components Clinical, Scholarship, and Teaching, effective *[effective date]* through *[work authorization end date]*. Upon renewal of work authorization, this appointment will be extended to the full complement of the reappointment period.

## Template for Chair's Letter to the Dean's Office Proposing Reappointment as Assistant Professor (CT)

Dear Dr. Baumhauer,

I am writing to propose the reappointment of [faculty member's name] as Assistant Professor of [Department] based on [her/his] excellence in the anticipated components of Clinical and Teaching, for a term of [two or three] years.

[summary of faculty member's background and training, and current roles in the Department, URMC, regionally/nationally if appropriate]

[separate paragraphs describing excellence in each anticipated activity component — recognizing that, at the time of reappointment as Assistant Professor, their accomplishments in each area are typically still emerging and do not yet fully meet the criteria for promotion in rank — using language as follows]

*Clinical:* [summarize evidence for “specialized professional services of the highest quality in patient care or other aspects of URMC missions” as evidenced by [specific points from Regulations of the Faculty Appendix Ic]] It is most helpful to provide descriptions of the nature of the faculty member's expertise and professional services, including a general sense of how much time/effort they spend on their clinical practice. As applicable, it also is helpful to provide metrics or other relatively objective evidence regarding the quality, innovation, or impact of the faculty member's clinical activities.

*Contributions to Academic Missions* (for faculty whose sole component is Clinical along with Teaching): [summarize evidence for “active support of URMC academic missions,” as evidenced by [specific points from Regulations of the Faculty Appendix Ic]]

*Teaching:* [summarize evidence for “excellence in teaching contributions,” broadly defined, as evidenced by [specific points from Regulations of the Faculty Appendix Ic]] It is helpful to provide descriptions of the faculty member's primary educational responsibilities, including a general sense of how much time/effort they spend on these. As applicable, it also is helpful to provide metrics or other relatively objective evidence regarding the quality, innovation, influence, or impact of the faculty member's educational activities.

*Service, Leadership, & National Recognition:* [summarize evidence for the faculty member “using her/his expertise and skills in any of the above components to the benefit of their department, the SMD, the University, and/or their field or discipline,” which may include leadership at local, regional, national, or international levels depending on career path, as evidenced by [specific points from Regulations of the Faculty Appendix Ic]]

*[Please note that the faculty member's professional efforts working with the community, or fostering diversity, equity, or inclusion, should be described as applicable to their activity components and/or as part of their service or leadership to the institution or field]*

In recommending this faculty member for academic reappointment, *[this faculty member has consistently demonstrated behaviors in keeping with our professionalism values, standards, and expectations] or [any significant professionalism concerns have been remediated to a degree sufficient to make this recommendation].*

*[Also please note that quotations from referee letters either should not be used, or should be used in de-identified form, because the faculty member will receive a copy of this letter after it is finalized.]*

[Close with summary paragraph, restating the proposed reappointment, anticipated components, and term]

[chair signature]

I concur with the above reappointment based on excellence in the anticipated components of Clinical and Teaching, effective [effective date] through [end date]

---

David C. Linehan, MD  
CEO, University of Rochester Medical Center  
Dean, School of Medicine and Dentistry  
Senior Vice President for Health Sciences

Alternate language for faculty with expiring work authorization:

I concur with the above reappointment based on excellence in the anticipated components Clinical and Teaching, effective *[effective date]* through *[work authorization end date]*. Upon renewal of work authorization, this appointment will be extended to the full complement of the reappointment period.

## Template for Chair's Letter to the Dean's Office Proposing Reappointment as Assistant Professor (IS-CT)

Dear Dr. Baumhauer,

I am writing to propose the reappointment of [faculty member's name] as Assistant Professor of [Department] based on [her/his] excellence in the anticipated components of Institutional Scholarship, Clinical, and Teaching, for a term of [two or three] years.

[summary of faculty member's background and training, and current roles in the Department, URMC, regionally/nationally if appropriate]

[separate paragraphs describing excellence in each anticipated activity component — recognizing that, at the time of reappointment as Assistant Professor, their accomplishments in each area are typically still emerging and do not yet fully meet the criteria for promotion in rank — using language as follows]

*Institutional Scholarship:* [summarize evidence for “distinctive institution-wide scientific or scholarly contributions that have a significant impact on the core missions of the SMD,” as evidenced by [specific points from Regulations of the Faculty Appendix Ic]].

*Clinical:* [summarize evidence for “specialized professional services of the highest quality in patient care or other aspects of URMC missions” as evidenced by [specific points from Regulations of the Faculty Appendix Ic]] It is most helpful to provide descriptions of the nature of the faculty member's expertise and professional services, including a general sense of how much time/effort they spend on their clinical practice. As applicable, it also is helpful to provide metrics or other relatively objective evidence regarding the quality, innovation, or impact of the faculty member's clinical activities.

*Teaching:* [summarize evidence for “excellence in teaching contributions,” broadly defined, as evidenced by [specific points from Regulations of the Faculty Appendix Ic]] It is helpful to provide descriptions of the faculty member's primary educational responsibilities, including a general sense of how much time/effort they spend on these. As applicable, it also is helpful to provide metrics or other relatively objective evidence regarding the quality, innovation, influence, or impact of the faculty member's educational activities.

*Service, Leadership, & National Recognition:* [summarize evidence for the faculty member “using her/his expertise and skills in any of the above components to the benefit of their department, the SMD, the University, and/or their field or discipline,” which may include leadership at local, regional, national, or international levels depending on career path, as evidenced by [specific points from Regulations of the Faculty Appendix Ic]]

*[Please note that the faculty member's professional efforts working with the community, or fostering diversity, equity, or inclusion, should be described as applicable to their activity components and/or as part of their service or leadership to the institution or field]*

In recommending this faculty member for academic reappointment, *[this faculty member has consistently demonstrated behaviors in keeping with our professionalism values, standards, and expectations] or [any significant professionalism concerns have been remediated to a degree sufficient to make this recommendation].*

*[Also please note that quotations from referee letters either should not be used, or should be used in de-identified form, because the faculty member will receive a copy of this letter after it is finalized.]*

[Close with summary paragraph, restating the proposed reappointment, anticipated components, and term]

[chair signature]

I concur with the above reappointment based on excellence in the anticipated components of Institutional Scholarship,

Clinical, and Teaching, effective *[effective date]* through *[end date]*

---

David C. Linehan, MD  
CEO, University of Rochester Medical Center  
Dean, School of Medicine and Dentistry  
Senior Vice President for Health Sciences

Alternate language for faculty with expiring work authorization:

I concur with the above reappointment based on excellence in the anticipated components of Institutional Scholarship, Clinical, and Teaching, effective *[effective date]* through *[work authorization end date]*. Upon renewal of work authorization, this appointment will be extended to the full complement of the reappointment period.

## Template for Chair's Letter to the Dean's Office Proposing Reappointment as Assistant Professor (IS-T)

Dear Dr. Baumhauer,

I am writing to propose the reappointment of [faculty member's name] as Assistant Professor of [Department] based on [her/his] excellence in the anticipated components of Institutional Scholarship and Teaching, for a term of [two or three] years.

[summary of faculty member's background and training, and current roles in the Department, URMC, regionally/nationally if appropriate]

[separate paragraphs describing excellence in each anticipated activity component — recognizing that, at the time of reappointment as Assistant Professor, their accomplishments in each area are typically still emerging and do not yet fully meet the criteria for promotion in rank — using language as follows]

*Institutional Scholarship:* [summarize evidence for “distinctive institution-wide scientific or scholarly contributions that have a significant impact on the core missions of the SMD,” as evidenced by [specific points from Regulations of the Faculty Appendix Ic]].

*Teaching:* [summarize evidence for “excellence in teaching contributions,” broadly defined, as evidenced by [specific points from Regulations of the Faculty Appendix Ic]] It is helpful to provide descriptions of the faculty member's primary educational responsibilities, including a general sense of how much time/effort they spend on these. As applicable, it also is helpful to provide metrics or other relatively objective evidence regarding the quality, innovation, influence, or impact of the faculty member's educational activities.

*Service, Leadership, & National Recognition:* [summarize evidence for the faculty member “using her/his expertise and skills in any of the above components to the benefit of their department, the SMD, the University, and/or their field or discipline,” which may include leadership at local, regional, national, or international levels depending on career path, as evidenced by [specific points from Regulations of the Faculty Appendix Ic]]

*[Please note that the faculty member's professional efforts working with the community, or fostering diversity, equity, or inclusion, should be described as applicable to their activity components and/or as part of their service or leadership to the institution or field]*

In recommending this faculty member for academic reappointment, *[this faculty member has consistently demonstrated behaviors in keeping with our professionalism values, standards, and expectations] or [any significant professionalism concerns have been remediated to a degree sufficient to make this recommendation].*

*[Also please note that quotations from referee letters either should not be used, or should be used in de-identified form, because the faculty member will receive a copy of this letter after it is finalized.]*

[Close with summary paragraph, restating the proposed reappointment, anticipated components, and term]

[chair signature]

I concur with the above reappointment based on excellence in the anticipated components of Institutional Scholarship and Teaching, effective [effective date] through [end date]

---

David C. Linehan, MD  
CEO, University of Rochester Medical Center

Dean, School of Medicine and Dentistry  
Senior Vice President for Health Sciences

Alternate language for faculty with expiring work authorization:

I concur with the above reappointment based on excellence in the anticipated components of Institutional Scholarship and Teaching, effective *[effective date]* through *[work authorization end date]*. Upon renewal of work authorization, this appointment will be extended to the full complement of the reappointment period.

## Template for Chair's Letter to the Dean's Office Proposing Reappointment as Assistant Professor(RCT)

Dear Dr. Baumhauer,

I am writing to propose the reappointment of [faculty member's name] as Assistant Professor of [Department] based on [her/his] excellence in the anticipated components of Research, Clinical, and Teaching, for a term of [two or three] years.

[summary of faculty member's background and training, and current roles in the Department, URMC, regionally/nationally if appropriate]

[separate paragraphs describing excellence in each anticipated activity component — recognizing that, at the time of reappointment as Assistant Professor, their accomplishments in each area are typically still emerging and do not yet fully meet the criteria for promotion in rank — using language as follows]

*Research:* [summarize evidence for “intellectually independent research in an identifiable area of scientific expertise,” as evidenced by [specific points from Regulations of the Faculty Appendix Ic]]. *If the faculty member's contributions are largely as part of a team* (and thus largely as middle author or roles on grants other than PI), comment explicitly on the evidence (from referee letters, disciplinary background, etc.) that the faculty member is the intellectual steward of a defined portion of the work.

*Clinical:* [summarize evidence for “specialized professional services of the highest quality in patient care or other aspects of URMC missions” as evidenced by [specific points from Regulations of the Faculty Appendix Ic]] It is most helpful to provide descriptions of the nature of the faculty member's expertise and professional services, including a general sense of how much time/effort they spend on their clinical practice. As applicable, it also is helpful to provide metrics or other relatively objective evidence regarding the quality, innovation, or impact of the faculty member's clinical activities.

*Teaching:* [summarize evidence for “excellence in teaching contributions,” broadly defined, as evidenced by [specific points from Regulations of the Faculty Appendix Ic]] It is helpful to provide descriptions of the faculty member's primary educational responsibilities, including a general sense of how much time/effort they spend on these. As applicable, it also is helpful to provide metrics or other relatively objective evidence regarding the quality, innovation, influence, or impact of the faculty member's educational activities.

*Service, Leadership, & National Recognition:* [summarize evidence for the faculty member “using her/his expertise and skills in any of the above components to the benefit of their department, the SMD, the University, and/or their field or discipline,” which may include leadership at local, regional, national, or international levels depending on career path, as evidenced by [specific points from Regulations of the Faculty Appendix Ic]]

*[Please note that the faculty member's professional efforts working with the community, or fostering diversity, equity, or inclusion, should be described as applicable to their activity components and/or as part of their service or leadership to the institution or field]*

In recommending this faculty member for academic reappointment, *[this faculty member has consistently demonstrated behaviors in keeping with our professionalism values, standards, and expectations] or [any significant professionalism concerns have been remediated to a degree sufficient to make this recommendation].*

*[Also please note that quotations from referee letters either should not be used, or should be used in de-identified form, because the faculty member will receive a copy of this letter after it is finalized.]*

[Close with summary paragraph, restating the proposed reappointment, anticipated components, and term]

[chair signature]

I concur with the above reappointment based on excellence in the anticipated components of Research, Clinical, and Teaching, effective [effective date] through [end date]



---

David C. Linehan, MD  
CEO, University of Rochester Medical Center  
Dean, School of Medicine and Dentistry  
Senior Vice President for Health Sciences

Alternate language for faculty with expiring work authorization:

I concur with the above reappointment based on excellence in the anticipated components of Research, Clinical, and Teaching, effective *[effective date]* through *[work authorization end date]*. Upon renewal of work authorization, this appointment will be extended to the full complement of the reappointment period.

## Template for Chair's Letter to the Dean's Office Proposing Reappointment as Assistant Professor (RT)

Dear Dr. Baumhauer,

I am writing to propose the reappointment of [faculty member's name] as Assistant Professor of [Department] based on [her/his] excellence in the anticipated components of Research and Teaching, for a term of [two or three] years.

[summary of faculty member's background and training, and current roles in the Department, URM, regionally/nationally if appropriate]

[separate paragraphs describing excellence in each anticipated activity component — recognizing that, at the time of reappointment as Assistant Professor, their accomplishments in each area are typically still emerging and do not yet fully meet the criteria for promotion in rank — using language as follows]

*Research:* [summarize evidence for “intellectually independent research in an identifiable area of scientific expertise,” as evidenced by [specific points from Regulations of the Faculty Appendix Ic]]. *If the faculty member's contributions are largely as part of a team* (and thus largely as middle author or roles on grants other than PI), comment explicitly on the evidence (from referee letters, disciplinary background, etc.) that the faculty member is the intellectual steward of a defined portion of the work.

*Teaching:* [summarize evidence for “excellence in teaching contributions,” broadly defined, as evidenced by [specific points from Regulations of the Faculty Appendix Ic]] It is helpful to provide descriptions of the faculty member's primary educational responsibilities, including a general sense of how much time/effort they spend on these. As applicable, it also is helpful to provide metrics or other relatively objective evidence regarding the quality, innovation, influence, or impact of the faculty member's educational activities.

*Service, Leadership, & National Recognition:* [summarize evidence for the faculty member “using her/his expertise and skills in any of the above components to the benefit of their department, the SMD, the University, and/or their field or discipline,” which may include leadership at local, regional, national, or international levels depending on career path, as evidenced by [specific points from Regulations of the Faculty Appendix Ic]]

*[Please note that the faculty member's professional efforts working with the community, or fostering diversity, equity, or inclusion, should be described as applicable to their activity components and/or as part of their service or leadership to the institution or field]*

In recommending this faculty member for academic reappointment, *[this faculty member has consistently demonstrated behaviors in keeping with our professionalism values, standards, and expectations] or [any significant professionalism concerns have been remediated to a degree sufficient to make this recommendation].*

*[Also please note that quotations from referee letters either should not be used, or should be used in de-identified form, because the faculty member will receive a copy of this letter after it is finalized.]*

[Close with summary paragraph, restating the proposed reappointment, anticipated components, and term]

[chair signature]

I concur with the above reappointment based on excellence in the anticipated components of Research and Teaching, effective [effective date] through [end date]

---

David C. Linehan, MD  
CEO, University of Rochester Medical Center  
Dean, School of Medicine and Dentistry  
Senior Vice President for Health Sciences

Alternate language for faculty with expiring work authorization:

I concur with the above reappointment based on excellence in the anticipated components of Research and Teaching, effective *[effective date]* through *[work authorization end date]*. Upon renewal of work authorization, this appointment will be extended to the full complement of the reappointment period.

## Template for Chair's Letter to the Dean's Office Proposing Reappointment as Assistant Professor(ST)

Dear Dr. Baumhauer,

I am writing to propose the reappointment of [faculty member's name] as Assistant Professor of [Department] based on [her/his] excellence in the anticipated components of Scholarship and Teaching, for a term of [two or three] years.

[summary of faculty member's background and training, and current roles in the Department, URMC, regionally/nationally if appropriate]

[separate paragraphs describing excellence in each anticipated activity component — recognizing that, at the time of reappointment as Assistant Professor, their accomplishments in each area are typically still emerging and do not yet fully meet the criteria for promotion in rank — using language as follows]

*Scholarship:* [summarize evidence for (non-Research) scholarship “demonstrating a developed, in- depth approach of the highest quality to an area of focused interest,” as evidenced by [specific points from Regulations of the Faculty Appendix Ic]].

*Teaching:* [summarize evidence for “excellence in teaching contributions,” broadly defined, as evidenced by [specific points from Regulations of the Faculty Appendix Ic]] It is helpful to provide descriptions of the faculty member's primary educational responsibilities, including a general sense of how much time/effort they spend on these. As applicable, it also is helpful to provide metrics or other relatively objective evidence regarding the quality, innovation, influence, or impact of the faculty member's educational activities.

*Service, Leadership, & National Recognition:* [summarize evidence for the faculty member “using her/his expertise and skills in any of the above components to the benefit of their department, the SMD, the University, and/or their field or discipline,” which may include leadership at local, regional, national, or international levels depending on career path, as evidenced by [specific points from Regulations of the Faculty Appendix Ic]]

*[Please note that the faculty member's professional efforts working with the community, or fostering diversity, equity, or inclusion, should be described as applicable to their activity components and/or as part of their service or leadership to the institution or field]*

In recommending this faculty member for academic reappointment, *[this faculty member has consistently demonstrated behaviors in keeping with our professionalism values, standards, and expectations] or [any significant professionalism concerns have been remediated to a degree sufficient to make this recommendation].*

*[Also please note that quotations from referee letters either should not be used, or should be used in de-identified form, because the faculty member will receive a copy of this letter after it is finalized.]*

[Close with summary paragraph, restating the proposed reappointment, anticipated components, and term]

[chair signature]

I concur with the above reappointment based on excellence in the anticipated components of Scholarship and Teaching, effective [effective date] through [end date]

---

David C. Linehan, MD  
CEO, University of Rochester Medical Center  
Dean, School of Medicine and Dentistry  
Senior Vice President for Health Sciences

Alternate language for faculty with expiring work authorization:

I concur with the above reappointment based on excellence in the anticipated components of Scholarship and Teaching, effective *[effective date]* through *[work authorization end date]*. Upon renewal of work authorization, this appointment will be extended to the full complement of the reappointment period.

**UNIVERSITY OF ROCHESTER SCHOOL OF MEDICINE AND DENTISTRY**

**A “FAST TRACK” PROCESS FOR  
PRELIMINARY REVIEW OF PROPOSED  
NEW SENIOR FACULTY APPOINTMENTS  
OR PROMOTIONS**

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**A. JUSTIFICATION:**

- When recruiting candidates for senior faculty appointments (i.e., associate professor and professor) in either basic or clinical sciences, the pool of viable candidates is frequently small, recruitment processes and negotiations may be protracted and, once a candidate accepts the offer, timelines for meeting a mutually desirable appointment start date are frequently short.
- Because of the above, an initial appointment as “Interim Professor” has often been used as a mechanism to allow the faculty member to be placed on the University of Rochester payroll and begin working, while awaiting the assembly and final review of all required appointment materials by the *ad hoc* and Steering Committees.
- Frequent use of such a mechanism creates problems – among them:
  - ❖ It anticipates and presumes endorsement by the *ad hoc* and Steering Committees of a permanent appointment as stipulated in the offer letter.
  - ❖ It has the potential for creating significant conflicts within these committees. Steering Committee members often feel conflicted, as they try to make objective judgments and recommendations free of bias.

The process outlined on the following page is designed to minimize these conflicts. The proposed approach takes advantage of the Office of Academic Affairs’ accumulated experience and expertise in offering to department chairs and center directors an informal assessment of the candidate’s academic credentials for the proposed rank/components prior to the completion of the recruitment process. The goal is to increase the likelihood that provisions in the final offer letter with respect to rank and components will be more consistent with what the ultimate recommendation of the *ad hoc* and Steering Committees might be.

## B PROCEDURE:

- 1) Before an offer letter for a senior faculty appointment (i.e., associate professor or professor) in any of the academic components (Research, Scholarship Institutional Scholarship, Clinical, plus Teaching) is finalized, and optionally before an internal promotion is proposed, the department chair and/or center director will submit to the Academic Affairs office (i.e., Vice Dean for Academic Affairs (SADAA)) the following:
  - (a) A brief memo summarizing: (i) key elements in the candidate's current position, research interests, special expertise and academic/professional contributions; (ii) the candidate's proposed role in the department and medical center with emphasis on the importance of the recruitment/promotion in meeting major programmatic, clinical, and/or research needs; (iii) the candidate's proposed rank, activity components and (when applicable) anticipated administrative leadership role.
  - (b) An up-to-date copy of the candidate's CV.
  - (c) Three to four internal and/or external letters of recommendation.

*Note: This requirement should be easily met. For the former, internal memos to the chair from individuals who may know or who have interviewed the candidate during visits are an appropriate substitute. For the latter, the department should already have on hand the customary number of letters of recommendation in conjunction with the candidate's initial application.*
- 2) Upon receipt, the SADAA will review the above material and then either: (i) make a recommendation, within one week, with respect to the proposed rank and activity components or any other issue that may need to be addressed by the department prior to constructing the final offer letter or chair's letter of recommendation; or (ii) ask one or two members of the Steering Committee (SC) to review the material and make a recommendation to the SADAA within one week. The SADAA will transmit the above (anonymized) recommendation to the department chair/center director. This recommendation may be made via CONFIDENTIAL e-mail and, if the chair agrees, he/she will incorporate the SADAA's recommendation in the offer letter or his/her letter of recommendation for the promotion.
- 3) Once the candidate accepts the offer, in writing, the department will promptly initiate the process to assemble the full complement of materials for the normal appointment or promotion process. When the complete dossier is received in the Academic Affairs' office, the SADAA will appoint the customary 3-member *ad hoc* committee, chaired by the SC member who served in the fast-track process.

Appendix G

SCHOOL OF MEDICINE & DENTISTRY

Job Codes, HRMS Job Code Descriptors, and Faculty Ranks

<u>bb Code</u>	<u>HRMS Descriptor<sup>1</sup></u>	<u>Faculty Rank/Functional Title</u>
0001	Professor:TE,T,R,S	<b>Professor</b>
0003	AssocProf:TE,T,R,S	<b>Associate Professor</b>
0005	AsstProf:TE,T,R,S	<b>Assistant Professor</b>
0007	SrInstruct:T,R,S	<b>SeniorInstructor</b>
0009	Instruct,T,R,S	<b>Instructor</b>
0046	Professor:T,S,Sp	<b>Professor ofClinical</b>
0048	AssocProf:T,S,Sp	<b>AssociateProfessorofClinical</b>
0060	AsstProf:T,S,Sp	<b>AssistantProfessorofClinical</b>
0072	SrInstruct:T,S,Sp	<b>Senior Instructor ofClinical</b>
0080	Instruct:T,S,Sp	<b>Instructor ofClinical</b>
0070	SrAssoc:T,S,Sp,Qual	<b>SeniorAssociate</b>
0071	Assoc:T,S,Sp,Qual	<b>Associate</b>
0073	Asst:T,S,Sp,Qual	<b>Assistant</b>
0038	Professor:R,S	<b>Research Professor</b>
0040	AssocProf:R,S	<b>Research Associate Professor</b>
0042	AsstProf:R,S	<b>Research AssistantProfessor</b>
<b>0111*</b>	AssocProf:T,S	<b>Associate Professor(Service)</b>
<b>0110*</b>	AsstProf:T,S	<b>Assistant Professor(Service)</b>
0010	SrInstruct:T,S	<b>Senior Instructor(Service)</b>
0044	Instruct:T,S	<b>Instructor(Service)</b>
* Prior Job Codes 0006 and 0008 are no longer available; please use the new codes 0110 and 0111		
0027	Professor: T, Sp	<b>Clinical Professor</b>
0029	Assoc Prof: T, Sp	<b>Clinical Associate Professor</b>
0031	Asst Prof: T, Sp	<b>Clinical Assistant Professor</b>
0033	Sr Instruct: T, Sp	<b>Clinical Senior Instructor</b>
0035	Instruct: T, Sp	<b>Clinical Instructor</b>
0120 <sup>†</sup>	Sr Assoc: T, Sp, Qual	<b>Clinical Senior Associate</b>
0074	Assoc: T, Sp, Qual	<b>Clinical Associate</b>
0036	Asst: T, Sp, Qual	<b>Clinical Assistant</b>

<sup>†</sup>new job code available for use

0117 no longer available for use; please contact OAA for guidance  
 0118 no longer available for use; please contactOAAforguidance



Appendix G

**SCHOOL OF MEDICINE & DENTISTRY**

Job Codes, HRMS Job Code Descriptors, and Faculty Ranks effective March 1, 2020

<u>Job Code</u>	<u>HRMS Descriptor<sup>1</sup></u>	<u>Faculty Rank/Functional Title</u>
0037	Professor: T	<b>Adjunct Professor</b>
0039	AssocProf: T	<b>Adjunct Associate Professor</b>
0041	AsstProf:T	<b>Adjunct Assistant Professor</b>
0043	SrInstruct:T	<b>Adjunct Senior Instructor</b>
0045	Instruct:T	<b>Adjunct Instructor</b>
0047	Professor:T,R	<b>Visiting Professor</b>
0049	AssocProf:T,R	<b>Visiting Associate Professor</b>
0057	AsstProf:T,R	<b>Visiting Assistant Professor</b>
0059	SrInstruct:T,R	<b>Visiting Senior Instructor</b>
0061	Instruct:T,R	<b>Visiting Instructor</b>
0099	N/A	<b>Departmental Fellow</b>

\* Prior Job Code 0099 is no longer available; please use job codes 0009 Instructor

**Special Use Job Codes – please consult with OAA prior to use**

<u>Job Code</u>	<u>HRMSDescriptor</u>	<u>Faculty Rank/Functional Title</u>
0123	active, no pay record	Professor Emeritus with NO PAY, or Clinical Professor Emeritus with NOPAY (not to be used for any other voluntary faculty type)
0124	Professor: T, R, S	Professor (part-time) For academic faculty <b>post-retirement ONLY</b> Professor Emeritus (if paid)
0125	Associate Professor: T,R,S	Associate Professor (part-time) For academic faculty <b>post-retirement ONLY</b>

<sup>1</sup>HRMS Descriptor

Faculty Job Codes in the University HR system will have letters (described below) in the job code title; these letters refer to certain types of faculty appointments. They do not determine a particular faculty member's duties or responsibilities.

TE – tenure eligible T  
-- Teaching

S – Service

R – Research p – Clinical/patient care

Dual – maximum credential (terminal degree) is not required

# APPENDIX H- URSMD ACADEMIC AFFAIRS – Faculty Demographics Form

Faculty Member Name:

Department:

Appointment (Start) Date:

Date of Birth:

Place of Birth:

Did you apply via HRMS?\*  Yes  No

Comment:

HRMS Applicant ID number:

\* Applying in HRMS required except in special circumstances

What is your gender? (Select all that apply)

- Man
- Non-Binary
- Woman
- Prefer to self-describe

Prefer not to provide

Are you Hispanic or Latino?

- Yes
- No
- Prefer not to provide

What is your race? (Select one or more)

- American Indian or Alaska Native
- Asian
- Black or African American
- Native Hawaiian or Pacific Islander
- White
- Prefer not to provide

# **APPENDIX I**

## **UR SMD CV TEMPLATE ANNOTATED TO SHOW PLACES WHERE DEI WORK CAN BE CONVEYED**

**UR SMD CV TEMPLATE**  
**ANNOTATED TO SHOW PLACES WHERE EDI WORK CAN BE CONVEYED - May**  
**2021**

*(revised May 2021)*

*[Bracketed italicized text is provided for guidance — please delete from your CV and replace with your information. Also, please delete category headings that are not applicable.]*

[name, degree] | [month, year CV updated] p. X

**UNIVERSITY OF ROCHESTER SCHOOL OF MEDICINE & DENTISTRY**  
**CURRICULUM VITAE**

**[Name, Degree]**  
[full mailing address]  
Telephone: | Fax:  
E-Mail:

*[optional]* **Date of Birth:**

*[optional]* **Citizenship:**

*[optional]* **Pronouns:**

**CURRENT POSITIONS**

*[list here only what you want visible at first glance; all listed in this section will be repeated in various sections below]*

[current academic appointment / department]  
[any other major leadership/administrative title/role]      MAJOR ROLE CAN GO HERE  
University of Rochester School of Medicine & Dentistry, Rochester, NY

**EDUCATION**

[years]            [degree, institution, location]

**POST-DEGREE TRAINING**

*[include residency, fellowship, postdoc training, or certificate programs or other major non-degree-granting educational programs taken; do not list all continuing education activities taken]*

*[for each, list:]*

[years]            [type of training/field, institution, location]

**PROFESSIONAL LICENSURE & CERTIFICATIONS**

[years]            [type of license, licensing state or agency]  
[years]            [specialty board/field, indicate if initial certification or maintenance  
certification] of

**FACULTY APPOINTMENTS**

[years]            [rank/title, department, institution, location]

**HOSPITAL & ADMINISTRATIVE APPOINTMENTS**

[years]            [role/title, department if relevant, institution/organization, location] ADMIN  
ROLES CAN GO HERE

## PROFESSIONAL NON-ACADEMIC EMPLOYMENT HISTORY

[years] [role/title]

## HONORS AND AWARDS

[year] [name of honor/award, institution or organization] AWARDS CAN GO HERE

## ACADEMIC & PROFESSIONAL ORGANIZATIONS

*[if helpful, consider using subheadings for local/regional vs national/international]*

MEMBERSHIP IN EDI-RELATED ORGANIZATIONS CAN GO HERE

[years] [organization in which you are a member]  
[year] [any appointed/elected role beyond membership, e.g., elected as a fellow, board of directors or officer role]

## COMMITTEES & OTHER ADMINISTRATIVE SERVICE

[may use subheadings, e.g., UR Department of {primary department}, UR Extra-Departmental, Local/Regional, National, International] EDI COMMITTEE WORK CAN GO HERE

[under each subheading, list as follows:]

[years] [role, name of committee or assignment, specify if departmental, school or other organizational unit if not already clear from title and subheading]

## PROFESSIONAL SERVICE ASSIGNMENTS

[only include those not covered by categories above] EDI SERVICE NOT COVERED ABOVE CAN GO HERE

## EDUCATIONAL CONTRIBUTIONS

EDI TEACHING / TRAINING DELIVERED CAN GO HERE

*[Subheading for type of learner; use subheadings such as undergraduate, graduate student, medical student, resident, postdoctoral fellow, junior faculty, continuing education {including local/regional presentations} — may further subdivide into UR vs regional, national, international if relevant]*

*[under each subheading, list as follows:]*

[years] [role/title {making clear if role involves teaching, assessment, curriculum development, mentoring/advising, or leadership/administration}, context/educational program, terse description of what the role involves {if needed}, terse description of how much time involved {if relevant, e.g., “0.20 FTE,” “4 hours/week x 8 weeks/year”} or mentoring role {e.g., may use \* to denote primary mentee if applicable}]

## COMMUNITY ACTIVITIES

EDI COMMUNITY WORK CAN GO HERE

[may include local, regional, national, or international community engagement or service]

[years] [role, organization, other description if needed]

EQUITY, DIVERSITY & INCLUSION ACTIVITIES

EDI ACTIVITIES CAN GO HERE — RECOMMENDED TO CHOOSE EITHER LISTING HERE OR LIST ACROSS OTHER SECTIONS, I.E., DO NOT LIST ACTIVITIES TWICE

[EDI activities may be listed here instead of distributed across other sections of the CV] [years]

[title or role, name and description, specify if departmental, institutional, community, national international, or other organizational unit if not already clear from title]

### **VISITING PROFESSORSHIPS & NAMED LECTURESHIPS**

[dates] [title/role, institution, location]

### **EXTERNAL ADVISORY / HEALTH COUNCILS & RESEARCH REVIEW COMMITTEES**

[dates] [role, organization/agency, location]

### **CONSULTATIONS**

FORMAL CONSULTATIONS CAN GO HERE

[dates] [role, agency/institution/organization, location]

WORK IN ANY TRADITIONAL ACADEMIC ACTIVITIES CAN GO IN ANY OF THE REMAINING, CORRESPONDING SECTION(S)

### **EDITORIAL ASSIGNMENTS IN PROFESSIONAL JOURNALS**

*Ad hoc* reviews for:

[list journals]

#### **Editorial Assignments**

*[may use subheadings to denote Editorial Board vs Editor & Associate Editor roles if desired]*

[dates] [title/role, journal]

### **PATENTS & INVENTIONS**

[inventors, invention, country, patent number, granted date]

### **GRANTS & CONTRACTS**

#### **As Principal Investigator / Co-Principal Investigator**

[for each, list P.I.s and Co-P.I.s, % effort supported, mechanism/type of funding, project name/title, funding agency, dates, total costs, and terse description of project or your role if needed]

#### **Other Roles**

[for each, list P.I.s and Co-P.I.s, your role, % effort supported, mechanism/type of funding, project name/title, funding agency, dates, total costs, and terse description of project or your role if needed]

### **UNFUNDED / OTHER RESEARCH PROJECTS**

[for each significant project, list dates, role, % effort supported {if applicable}, project name/title, source of support {if applicable}, terse description of project]

### **PRESENTATIONS**

\* *denotes trainee / supervisee*

[conferences refer to work submitted for presentation]

**Local, Regional, & State Conferences**

[date] [authors, title, type of presentation {if applicable, e.g., poster,symposium}, meeting/organization name, location]

**National & International Conferences**

[date] [authors, title, type of presentation {if applicable, e.g., poster,symposium}, meeting/organization name, location]

**Invited Presentations: Local, Regional, & State**

[date] [title, meeting/organization/institution name, location]

**Invited Presentations: National & International**

[date] [title, meeting/organization/institution name, location]

**PUBLICATIONS**

\* *denotes trainee / supervisee*

[may include ‘Published Abstracts’ section if desired, but for most, this will be ‘covered’ above under presentations at meetings]

**Peer-Reviewed Journal Articles**

[numbered list with authors, title, journal, volume, pages, year]

**Books, Monographs, Chapters, & Reviews**

[numbered list with authors, title, journal or book title, volume, pages, year]

**Letters, Editorials, & Other Publications**

[numbered list with authors, title, journal/venue, volume, pages, year]

**Other Media**

NOTE THAT ACTIVITIES IN SOCIAL MEDIA CAN GO HERE IF REACH/IMPACT CAN BE DEMONSTRATED

[i.e., any non-print media / enduring materials including webinars]

[numbered list with authors, title, type of media, issue/volume/pages {if applicable}, publisher {if applicable}, date] [include brief metrics if helpful to demonstrate reach/impact]

**Appendix J**  
**Chair**  
**Attestation**



**Primary Reappointment  
Chair Attestation Document for Reappointment  
of Associate Professor and Professor\***

Name:

Reappointment Term:

*Please Check All Boxes:*

- A formal assessment including feedback of the faculty member's annual review (completed either electronically in MyPath or by paper submission) and current CV was performed.
- A discussion regarding the faculty member's current rank, academic interests and future goals was performed.
- Future potential promotion opportunities, criteria, timeline and components (teaching, clinical care, research, scholarship, leadership and institutional scholarship and service) highlighted by the faculty member's area of interest were discussed.
- The teaching evaluations of the faculty member and/or contributions of the educational program were discussed.
- In recommending this faculty member for reappointment, one of the following statements is true: a) this faculty member has consistently demonstrated behaviors in keeping with our Professionalism values, standards and expectations; or b) any significant professionalism concerns have been remediated to a degree sufficient to make this recommendation

*If Applicable:*

- If Research Associate Professor or Research Professor: Funding source(s) for salary for the entire appointment period:

Faculty Signature

Chair Signature

Print Faculty Name

Print Name

Department:

Date:

\*applicable faculty titles: Professor, Professor of Clinical, Research Professor, Clinical Professor, Associate Professor, Associate Professor of Clinical, Research Associate Professor, Clinical Associate Professor

**Appendix K**  
**Joint Chair**  
**Attestation**

**Joint Reappointment  
Joint Chair Attestation Document for Joint  
Appointments**

Faculty Member Name:

Term of Reappointment:

*Please Check All Boxes:*

In recommending this faculty member for reappointment this faculty member has consistently demonstrated behaviors in keeping with our Professionalism values, standards and expectations.

This faculty member remains in good standing and is an active participant in the Department/Center of

Joint Chair Signature

Print Chair Name Department:

Date: