

**Louisiana State University System  
and Agricultural & Mechanical College**

**INSTRUCTIONS FOR PROMOTION/TENURE REVIEW REQUEST**

**Please keep all pages of the promotion/tenure review form together and attach biographical data behind Page 4 of the form.**

**Submit ONE ORIGINAL FORM WITH ATTACHMENTS and THREE COPIES OF THE FORM WITH ATTACHMENTS.**

**The following biographical data must be included in the order listed and each item addressed. See pages 46-49 of PS-36 (Revision 5, July 1, 1997) for complete description of items.**

- History of Assignments
  
- Teaching
  - Documentation of Teaching Activities
  - Listing of publications concerning instruction
  - Listing of publications concerning instruction accepted for publication but not yet published
  - Participation in Professional Meetings, Symposia, Workshops, and Conferences on teaching and Local instructional activities
  - Other instructional activities or other contributions to the profession
  - Awards, lectureships, or prizes that show recognition of teaching achievement
  - Research Support/Grant Activities
  
- Research and Creative Activity
  - Listing of research publications [Published items only]
  - Listing of other publications accepted for publication but not yet published
  - Other creative and artistic contributions
  - Participation in Other Professional Meetings, Symposia, Workshops, and Conferences (other than artistic performances)
  - Other scholarly or creative activities or other contributions to the profession
  - Other awards, lectureships, or prizes that show recognition of scholarly or artistic achievement
  - Other research Support/Grant Activities
  - Theses/dissertations directed (Numbers only)
  - Major areas of research interest
  
- Service
  - Student organizations advised
  - Recruitment of students and faculty
  - University service (department, college, university, and Faculty Senate committees)
  - Professional service
  - Other external service

Campus \_\_\_\_\_

Promotion/Tenure Review Request

Date Submitted \_\_\_\_\_

Name \_\_\_\_\_

Social Security Number \_\_\_\_\_

Department \_\_\_\_\_

College \_\_\_\_\_

Present Rank/Title \_\_\_\_\_

Years of Service:

(academic & administrative, if applicable)

In LSU System \_\_\_\_\_

Date appointed \_\_\_\_\_

In present rank \_\_\_\_\_

Appointment Status: \_\_\_\_\_ Tenured

Elsewhere \_\_\_\_\_

\_\_\_\_\_ Term

Graduate Faculty Status: \_\_\_\_\_ Member

Pay Basis: \_\_\_\_\_ AY

\_\_\_\_\_ Associate

\_\_\_\_\_ FY

\_\_\_\_\_ None

Reviewed for:

\_\_\_\_\_ Promotion to rank of \_\_\_\_\_

\_\_\_\_\_ Tenure

\_\_\_\_\_ Tenure only

Effective Date \_\_\_\_\_

Education:

Institution

Degree

Date Awarded

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Professional Experience (include LSU System):

Institution

Rank

Period of Appointment

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

CANDIDATE: \_\_\_\_\_

**EVALUATION BY THE TENURED/SENIOR DEPARTMENT FACULTY**

The individual's qualifications in the following areas should be considered for each reviewing authority to make a valid and discriminating judgement: (1) Instructional ability, (2) Scholarly and research activity, (3) Participation in departmental, college, and university activities, and (4) Community service.

Current distribution of academic staff within the department/division:

Professor \_\_\_\_\_; Associate Professor \_\_\_\_\_; Assistant Professor \_\_\_\_\_; Instructor \_\_\_\_\_

The vote of the tenured/senior department faculty on the proposed action:

_____ favorable	_____ opposed	_____ abstained	_____ absent
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CANDIDATE \_\_\_\_\_

EVALUATION BY DEPARTMENT CHAIR/HEAD

\_\_\_\_\_ Recommended

\_\_\_\_\_ Not Recommended      \_\_\_\_\_ Department Chair/Head      \_\_\_\_\_ Date

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EVALUATION BY DEAN/DIRECTOR

\_\_\_\_\_ Recommended

\_\_\_\_\_ Not Recommended      \_\_\_\_\_ Dean/Director      \_\_\_\_\_ Date

CANDIDATE: \_\_\_\_\_

EVALUATION BY CAMPUS REVIEW COMMITTEE OR OFFICIAL

		Reviewers				
A.	Evaluation of proposed action:	1	2	3	4	5
	A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	B	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	C	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	D	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	F	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

B. Action recommended by other campus review official:

Recommended \_\_\_\_\_  
 \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Not recommended \_\_\_\_\_  
 \_\_\_\_\_ Title \_\_\_\_\_

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CAMPUS ACTION

RECOMMENDED  
 NOT RECOMMENDED \_\_\_\_\_ Executive Vice Chancellor & Provost \_\_\_\_\_ Date \_\_\_\_\_

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 RECOMMENDED  
 NOT RECOMMENDED \_\_\_\_\_ Chancellor \_\_\_\_\_ Date \_\_\_\_\_

Split-appointment campus action:

RECOMMENDED  
 NOT RECOMMENDED \_\_\_\_\_ Vice Chancellor \_\_\_\_\_ Date \_\_\_\_\_

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 RECOMMENDED  
 NOT RECOMMENDED \_\_\_\_\_ Chancellor \_\_\_\_\_ Date \_\_\_\_\_

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LSU SYSTEM ACTION

RECOMMENDED  
 NOT RECOMMENDED \_\_\_\_\_ Vice President for Academic Affairs \_\_\_\_\_ Date \_\_\_\_\_

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 APPROVED  
 NOT APPROVED \_\_\_\_\_ President \_\_\_\_\_ Date \_\_\_\_\_

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BOARD ACTION

(August 1992)