**FORM 5**

**APPLICATION FOR FACULTY PROMOTION**

1. Name: Date:
2. Department:
3. I have completed or will complete the minimum requirements for the academic rank checked below, and I believe myself to be eligible for promotion to:

 **Assistant Professor Associate Professor Professor**‬‬‬‬

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 Date Candidate's Signature Nominator's Signature

4. Highest degree held:

5. If an appropriate terminal degree has been completed but not yet awarded, enter verifying documents as the next sheets of paper in this application and check this box. ‬‬‬‬

6. Check the eligibility for promotion:  **Regular**  **Other**

If “**Other**,” explain briefly.

7. If the equivalency type of eligibility is used, enter as the next sheet of paper in this application a statement by the departmental promotion committee clearly specifying those details of a candidate's educational and experiential qualifications that constitute equivalency to the terminal degree.

8. Give the date ranges for time in each rank at Rowan (as applicable).

 **Instructor:**   **to**

 **Assistant Professor:**   **to**

 **Associate Professor:**   **to**

**Date of Appointment to Rowan**: **Date of Tenure at Rowan:**

**Professional Experience**

 Total years college teaching experience

 Total years other teaching experience

 Early Childhood levels

 Elementary levels

 Secondary levels

 Total years collegiate administrative experience

 Total years other relevant experience (i.e., business, industry, gov’t, etc.)