

## FORM 8

### SIGNATURE SHEET FOR EVALUATIVE CRITERIA APPROVED CRITERIA SHALL HAVE ALL REQUIRED SIGNATURES

Department/Office: Chemistry and Biochemistry

Department Chair/Head: Subash Jonnalagadda  
Print or type

  
Signature

Academic Year (circle):            16-17            17-18            18-19            19-20            20-21

Date Sent to Dean/Supervisor: 09/25/2020

Signature	Date	Approved
	<u>02/05/2021</u>	<input checked="" type="radio"/> Y / P / N
Dean/Supervisor:	_____	Y / P / N

Add'l Admin:	Date	Approved
	<u>02/15/21</u>	<input checked="" type="radio"/> Y / P / N
Provost/designee:	_____	Y / P / N

President/designee:	Date	Approved
_____	_____	Y / P / N

Y = Approved	P = Approved pending modifications	N = Not approved
--------------	------------------------------------	------------------

For P or N decisions, the departmental committee should be provided with the reasons for non-approval, as well as suggested changes to the criteria within a reasonable time to ensure timely approval for first year candidates.

**DIRECTIONS:** Sign each line and print or stamp name below the line. This signature page must accompany the evaluative standards throughout the entire approval process and serves as a record that all levels have contributed to the approval process. After all levels have approved the evaluative standards, this cover page and the criteria shall be duplicated, and a copy sent to the Senate office for archiving. The original criteria packet is returned to the Department/Office.

<b>SUGGESTED TIMETABLE:</b>	<b>DATE</b>
Departmental approval, sent to Dean/Supervisor:	<b>September 25 (earlier if possible)</b>
Dean provides feedback regarding criteria	<b>October 9</b>
Final administrative approval and forwarding to Senate, Department, and Dean	<b>November 1</b>