

FORM 8

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

Department/Office: Health & Exercise Science

Department Chair/Head: Greg Biren.
Print or type

Gregory Biren
Signature

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

Date Sent to Dean/Supervisor: 09/14/2020

Signature
Karen Magee-Sauer
Dean/Supervisor:

Date
10/30/2020

Approved
Y / P / N

Y / P / N

Add'l Admin:
[Signature]
Provost/designee:

02/15/21

Y / P / N

President/designee:

Y / P / N

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

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