



# Adjunct Professor Recommendation for Appointment Form

<b>Applicant Information</b>	
Name: _____	
Institutional Address: _____	
Telephone #: _____	Fax #: _____
Professional Qualifications: _____	
<b>Appointment Information</b>	
School/Program: _____	Effective Date: _____/_____/_____ day month year
Length of Appointment: _____	Other (please specify) _____
<b>Criteria &amp; Documentation Required</b>	
<p>Criteria: 1. Educational qualifications and academic experience appropriate for appointment as an academic staff member, i.e. Ph.D.</p> <p>2. Post-secondary faculty or research appointment or will have a combination of qualifications and experience that allows them to contribute to research and teaching within the academic unit.</p> <p>Documentation Required:</p> <ul style="list-style-type: none"> <li>Current curriculum vitae</li> <li>Letter of support from current employer</li> <li>Recommendation from Dean (Grenfell Campus) following <b>collegial consultation</b> with the ASMS in the unit. The recommendation should state the benefits of the appointment to the affairs of the academic unit.</li> </ul>	
_____ Applicant Signature	_____/_____/_____ day month year
<b>Approvals</b>	
Recommended	
Yes No _____ Dean	_____/_____/_____ day month year
Yes No _____ Vice-President (Grenfell Campus)	_____/_____/_____ day month year