

# Cratis D. Williams School of Graduate Studies

APPALACHIAN STATE UNIVERSITY

## Graduate Faculty Membership Application

Attach a current vita/resume and a letter describing evidence of engagement in **graduate** education during the last five years, including:

- Evidence of staying current in the discipline
- Evidence of effective teaching and mentoring at the graduate level; new faculty may include evidence of *potential* for effective teaching and mentoring

For additional guidelines and examples, please refer to the Graduate Faculty Membership policy available on the Graduate School Website.

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_

Banner ID: \_\_\_\_\_ Email: \_\_\_\_\_

Discipline: \_\_\_\_\_ Dept: \_\_\_\_\_

Academic year of next review: \_\_\_\_\_

(post-tenure/promotion/tenure/reappointment):

Date of approval of the PTC, DPC or PTR Committee: \_\_\_\_\_

Membership Type:                      Affiliate Member\* (See below)                      Full (Five years)

Department Approval:                      Yes                      No

Department Chairperson Name: \_\_\_\_\_

Department Chairperson Signature and Date: \_\_\_\_\_

College/School Approval:                      Yes                      No

Academic Dean Name: \_\_\_\_\_

Academic Dean Signature and Date: \_\_\_\_\_

\*If Affiliate Membership is requested, please provide specific responsibility (e.g., course, thesis/dissertation committee, etc.) \_\_\_\_\_

If external, is this person eligible to teach graduate courses at his/her own institution?    Yes                      No

Requested timeframe of membership: Begin: \_\_\_\_\_ End: \_\_\_\_\_

Approval of Dean of the School of Graduate Studies: \_\_\_\_\_