

SIGNED STATEMENT REQUESTING FOR A DEFERRAL (Tenured Faculty Only)

Name		
College/School (Primary)		
Department(s)		
Years at Rank/Step		
Current Title		
Enclosures (if applicable)		
Candidate's Comments: (Use a separate s	heet if necessary)	
Signature	. Date	
Chair's Comments: (Use a separate sheet i	f necessary)	
Signature	Date	
Dean's Comments: (Use a separate sheet it	necessary)	
Signature	Date	

This form and a signed Procedural Safeguard Statement (Attachment B-1) are required by the Academic Personnel Office (APO). Please retain copies in the college.

Office of Record: Academic Personnel (APO) will remain the office of record for these delegated actions. This form and a signed Procedural Safeguard Statement (Attachment B-1) must be be sent to APO once the action is complete. The information will be provided by APO to CAP.

FILE TRACKING				
Description	Date	Initials	Comments	
File received in Dean's Office				
File received in APO				