

		CHECKLIST OF DOCUMENTS FOR APPRAISALS
Name:		Department:
See The C	ALL fo	or details on how to complete these required parts of the review.
	A.	Checklist of Documents in File
	B.	Signed Procedural Safeguards Statement
	C.	Signed Candidate Statement for Conflict of Commitment
	D.	Department Chair's Letter (optional) (confidential)
	$E.^1$	Departmental Recommendation Letter (must include vote)
	F. <sup>1</sup>	Minority Report (if applicable)
	$G.^1$	Candidate's response to the Departmental Recommendation Letter (optional)
	$H^{1}$	
	I.	Candidate's Response to material in the file (optional)
	$J.^2$	Student Letters Evaluating Teaching (required if non-confidential teaching evaluations are not
		provided)
_		Solicitation letter or statement as to how obtained
	K. 3	Current Bibliography of Publications/Creative Activity
<u> </u>	L.3	Professional Activity and Service (not applicable for SOE Series)
<u> </u>	$M.^3$	· · · · · · · · · · · · · · · · · · ·
<u> </u>	$N.^3$	University and Public Service
<u> </u>	0.3	
<u> </u>	P.4	Teaching Information Form
<u> </u>	$Q.^4$	
		Letters from Other Departments/ Programs/ Institutes/ Centers (optional)
	S.	Other - Confidential (specify item(s) below):
	T.	Other - Non-confidential (specify item(s) below):

See <u>The CALL</u> for page limitations
Indicate # included
Since appointment, include the current year
Include activity and evaluations` for the previous nine quarters

FILE TRACKING				
Description	Date	Initials	Comments	
File received in Dean's Office				
File received in APO				
File sent to CAP				
Final decision received in APO				
Announcement date				

Additional Remarks (if applicable): Attach a separate sheet