

	CHECKLIST OF DOCUMENTS FOR APPRAISALS					
Name:	Department:					
See The CALL f	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.¹	Minority Report (if applicable)					
\Box G. ¹	Candidate's response to the Departmental Recommendation Letter (optional)					
\square H. ¹	Candidate's Self-Statement (optional but strongly encouraged)					
□ 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					
\Box L. ³	Professional Activity and Service (not applicable for SOE Series)					
\square M. ³	Professional Achievement and Service (for SOE Series only)					
\square N. ³	University and Public Service					
\square O. ³	Grant Activity					
☐ P. ⁴	Teaching Information Form					
\square Q. ⁴						
☐ R.	Letters from Other Departments/ Programs/ Institutes/ Centers (optional)					
	Other - Confidential (<i>specify item</i> (<i>s</i>) <i>below</i>):					
□ 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

		FII	LE 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