COMPLETE FOR REAPPOINTMENT

DEPARTMENTAL RECOMMENDATION
Reappointment for [**Candidate**]
In the **Department of [   ]**

Department Meeting Date: Date Letter prepared: Date(s) Revised:

PRESENT STATUS (include current full title with step <u>including o/s</u> if applicable. Include other titles being reviewed if applicable.

Rank & Step: Years at Rank: Years at Step:

DEPARTMENTAL RECOMMENDATION (Majority vote. Include if "For" (positive) or "Against" (negative) reappointment at current rank, step and o/s if applicable).

For/Against Reappointment:

VOTE(S) (Include reasons for minority votes in narrative below.)

	#Eligible	For	Against	Abstain	Not Voting/Unavailable
Reappointment:					
Advisory Vote:					

During the review period, Sabbatical Leave Reports (APM 740-97) are:
Not Due ☐   On file and available upon request ☐   Not on file (include explanation) ☐   N/A ☐
During the review period, a Leave of Absence for a quarter or more (other than Sabbatical) was taken:
Yes ☐   Start Date: _____ End Date: _____   No ☐

COMPLETE FOR APPRAISAL

DEPARTMENTAL RECOMMENDATION
Appraisal for [**Candidate**]
In the **Department of [   ]**

Department Meeting Date: Date Letter prepared: Date(s) Revised:

PRESENT STATUS (include current full title with step <u>including o/s</u> if applicable. Include other titles being reviewed if applicable.

Rank & Step: Years at Rank: Years at Step:

DEPARTMENTAL RECOMMENDATION (Majority vote. Put a checkmark on the outcome. For equally split decisions, check all that apply.)

☐ Positive   ☐ Qualified Positive   ☐ Negative

*VOTE(S) (Add/delete Sections as needed. Include minority votes in narrative below.)

	#Eligible	Positive	Qualified Positive	Negative	Abstain	Not Voting/Unavailable
Vote:						
Advisory Vote:						

During the review period, Sabbatical Leave Reports (APM 740-97) are:
Not Due ☐   On file and available upon request ☐   Not on file (include explanation) ☐   N/A ☐
During the review period, a Leave of Absence for a quarter or more (other than Sabbatical) was taken:
Yes ☐   Start Date: _____ End Date: _____   No ☐