ATTACHMENT D-1B

Departmental Recommendation:

Quinquennial

COMPLETE FOR QUINQUENNIAL

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| **DEPARTMENTAL RECOMMENDATION** |
| **Quinquennial Review** for [**Candidate]** |
| In the **Department of [ ]** |
| Department Meeting Date: | Date Letter prepared: | Date(s) Revised: |
| **PRESENT STATUS** (include current full title with step including o/s 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.) |
| Satisfactory Unsatisfactory |
| **\*VOTE(S):** (Include minority votes in narrative below.) |
| **Vote:** #Eligible Satisfactory Unsatisfactory Abstain Not Voting/Unavailable**Advisory Vote:** #Eligible Satisfactory Unsatisfactory Abstain Not Voting/Unavailable |
| **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  |

Last Revision Date: July 1, 2023

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