

CHECKLIST OF DOCUMENTS FOR QUINQUENNIAL REVIEWS

Name: _____ Department: _____

See [The CALL](#) for 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)*
- G.¹ Candidate's response to the Department Recommendation Letter *(optional)*
- H.¹ Candidate's Self-Statement *(optional but strongly encouraged)*
- I. Candidate's Response to material in the file *(optional)*
- J. Current Bibliography of Publications/Creative Activity
- K. Bibliography at Last Advance
- L.³ Publication and Creative Activity *(include candidate's contribution to joint-authored works)*
- M.³ Professional Activity and Service *(not applicable for SOE Series)*
- N.⁴ Professional Achievement and Service
- O.³ University and Public Service
- P.³ Grant Activity
- Q.³ Teaching Information Form
- R.³ Student Evaluation of Teaching
 - Evaluations for all courses taught in last 5 years - campus teaching evaluation forms, etc.
- S.^{2,4} Classroom Observations *(last 5 years)*
- T. Letters from Other Departments/ Programs/ Institutes/ Centers *(optional)*
- U. Mentorship Statement *(Optional)*
- V. Department Research and Creative Work Statement *(Required)*
- W. Covid-Impact Statement *(Optional)*
- X. Other - Confidential *(specify item(s) below):*

- Y. Other - Non-confidential *(specify item(s) below):*

¹ See [The CALL](#) for page limitations

² Indicate # included

³ Include last 5 years

⁴ For Lecturer with Security of Employment Series only

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