

UNIVERSITY OF SOUTHERN CALIFORNIA

RECOMMENDATION FOR PROMOTION

DATE _____

School _____

Second School _____

Department _____

Second Dept. _____

NAME _____

Terminal Degree _____ Date _____ Institution _____

Proposed Rank and Title _____ with Tenure _____

- Full Time
- Part Time

- Fiscal Year
- Academic Year

- Fall Semester Only
- Spring Semester Only

Title of concurrent administrative appointment, if any _____

Present Position _____ with Tenure _____

Institution _____

First Term at USC to begin _____

Number of years accumulated towards tenure at other institutions _____

Date of Mandatory Decision on tenure at USC _____

Dept. Chair _____

Date _____

Dept. Chair _____
(if joint or dual appointment)

Date _____

Dean _____

Date _____

Dean _____
(if joint appointment)

Date _____

Vice President _____

Date _____

President _____

Date _____