

**Graduate Faculty Application**

(Please type)

Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Department: \_\_\_\_\_ Rank: \_\_\_\_\_

Highest Degree: \_\_\_\_\_ Institution: \_\_\_\_\_

Date Tenured: \_\_\_\_\_

Disciplines in which you have minimum of 18 graduate semester hours: \_\_\_\_\_

Disciplines you will teach at UT Martin: \_\_\_\_\_

**Membership Category Requested** (Check either initial or renewal for membership category requested)

<b>Affiliate Membership</b>	<b>Full Membership</b>
<p><u>    </u> <b>Initial</b></p> <p>For 3 years beginning _____ Term, 20 _____</p> <ul style="list-style-type: none"> <li>• Tenure-track, FT non-tenured, visiting, or adjunct faculty</li> <li>• Evidence of engagement and currency in the discipline during the last three years, or evidence of potential for effective teaching, mentoring, and scholarship at the graduate level</li> </ul> <p><u>    </u> <b>Renewal</b></p> <p>For 3 years beginning _____ Term, 20 _____</p> <p>Has demonstrated</p> <ul style="list-style-type: none"> <li>• Evidence of engagement and currency in the discipline during the last three years</li> </ul>	<p><u>    </u> <b>Initial</b></p> <p>Beginning _____ Term, 20 _____</p> <ul style="list-style-type: none"> <li>• Tenured</li> <li>• Associate Professor or higher</li> <li>• Terminal degree</li> <li>• Evidence of Graduate-level academic engagement and currency</li> </ul> <p><u>    </u> <b>Renewal</b></p> <p>Date of last review _____ Term, 20 _____</p> <ul style="list-style-type: none"> <li>• Evidence of the applicant's engagement and currency in graduate-level education and scholarship during the immediately preceding review period (Tenure, Promotion, or Post-Tenure Review)</li> </ul>
<p><i>Complete This Section for Both Initial and Renewal Requests</i></p> <p>Teach specific course(s)/discipline(s) or needed for specific service. Identify:</p>  <p>Serve on thesis and/or comprehensive examination committee</p>	<p><i>Complete This Section for Both Initial and Renewal Requests</i></p> <p>Identify type of last review and any specific course/discipline assignment(s):</p>  

**Comments :**

\_\_\_\_\_

**Recommendations and Approval—Your signature denotes your support of this application.**

\_\_\_\_\_  
Faculty Member Date

\_\_\_\_\_  
Chair Date

\_\_\_\_\_  
Coordinator (if applicable) Date

\_\_\_\_\_  
Dean of College Date

Submit the completed original application to the Graduate Studies Office.

\_\_\_\_ Approved effective: \_\_\_\_\_ Expiration date: \_\_\_\_\_

\_\_\_\_ Denied \_\_\_\_\_

\_\_\_\_\_  
Graduate Council Chair Date