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| CHAIRPERSON’S NOMINATION FORM FOR SENIOR RANK***COMMUNITY/ADJUNCT FACULTY***  (Please check all that apply and include form with nomination material)  NOMINEE’S NAME:  DEPARTMENT: Choose an item. |
| NOMINEE IS BEING CONSIDERED FOR:  Appointment Choose an item.  Promotion Choose an item. |
| **IF THIS NOMINATION IS FOR PROMOTION TO SENIOR RANK, the rest of this form shall be left blank.** The criteria for promotion shall be addressed in the chair’s letter and the personal statement of the candidate. |
| **IF THIS NOMINATION IS FOR APPOINTMENT AT SENIOR RANK, it “shall be based on prior accomplishments using the criteria in one of our professional categories.”** |
| Below, please indicated the category and criterion on which the nomination is based (Please refer to [Professional Categories](http://health.uconn.edu/faculty-development/academic-advancement/professional-categories/) on the Faculty Affairs website for the detailed criteria in the category that all nominees must meet).   * MEDICAL EDUCATOR: Choose ONLY ONE item * If selected clinical achievement: measured through development or improvement of:   Choose an item.   * If selected education: Choose an item.   Note: Faculty in the Medical Educator professional category prior to September 12, 2016 are grandfathered and may opt to be evaluated on the old Medical Educator criteria.  If you choose this option, please check *one* the following:  Development Choose an item. or  Improvement Choose an item. |
| PROFESSIONALISM:  I have reviewed with UME, GME, and Graduate Student education leaders to confirm that there have not been any professionalism/compact concerns regarding this faculty member. |

Office of Faculty Affairs 2/2024