University of Southern Indiana

(completed by the applicant) 1. Name: _____ Current rank: ____ College: _____ Department: ____ 2. Current Faculty Track: Tenure Track Clinical Track 3. Personnel Action Requested - Reappointment for a: Two-year Contract Three-year Contract Five-year Contract Other: 4. Year & Semester Initially Appointed to Tenure Track or Clinical Track: Leave(s) of Absence, list semester(s): For tenure-track faculty, Year(s) of tenure credit: ___ and Year eliqible for tenure: or \bigcap N/A For tenured faculty, Year/semester of tenure: _____ or $\ \square$ N/A 5. Years in current faculty rank at USI, as of the end of this academic year: ____ I have reviewed the portfolio that I am submitting with this application, and I am presenting it as accurate, complete, current, and ready for review. I also affirm that the material contained in this portfolio is my work unless it is clearly identified on its face as the work of someone else. I understand that I may not add or remove material in the portfolio once submitted. Applicant's Signature _____ Date _____ The following is completed by the appropriate administrator or review committee. (Indicate if not applicable.) Date: Portfolio received by: Date: Materials Added: Ву: Department/Program Chair Department Review Committee College/Unit Review Committee College Dean/Library Director

Revision date: 6.20.2023

Provost