

## **PROFESSIONAL SERVICE**

**Professor of Clinical and Associate Professor of Clinical**

## **VOLUNTARY FACULTY**

**Clinical Professor and Clinical Associate Professor**  
No-Pay, TAR (under 0.5FTE, % effort must be supplied)

### **PROMOTIONS:**

**Professor of Clinical, Associate Professor of Clinical, and Clinical Professor:** MEDSAC Steering Committee and University Board of Trustees approval is required for promotion.

**Clinical Associate Professor:** University Board of Trustees approval is required for promotion.

### ***PLEASE SUBMIT ITEM 1 in hard copy to OAA***

1. Faculty Personnel Action Form (PAF 510).

### ***PLEASE SUBMIT ITEMS 2 - 4 VIA the Promotions & Reappointment Manager (PRM)***

2. Department Chair recommendation letter (For joint appointment(s) include recommendation letter from appropriate Department Chair(s))
3. Current Curriculum Vitae – following either URSMD (see Appendix II of the [SMD Regulations of the Faculty](#), pages 38-40), or eCV format
4. Referee letters - for Professor 3-5; for Associate Professor 2-4 (May be from either internal or external referee). **Note: ALL received letters of recommendation must be included, regardless of content, in the reappointment packet.**

### **REAPPOINTMENTS:**

**Professor of Clinical, Associate Professor of Clinical, Clinical Associate Professor, and Clinical Professor:** University Board of Trustees approval is required for reappointment.

### ***PLEASE SUBMIT ITEM 1 in hard copy to OAA***

1. Faculty Personnel Action Form (PAF 510)

### ***PLEASE SUBMIT ITEM 2 VIA the Promotion & Reappointment Manager (PRM)***

2. Department Chair recommendation letter (For joint appointment(s) include recommendation letter from appropriate Department Chair(s))

## RESEARCH ASSOCIATE PROFESSORS

### **INITIAL APPOINTMENT:**

MEDSAC Steering Committee and University Board of Trustees approval is required for initial appointment.

### ***PLEASE SUBMIT ITEMS 1-5 in hard copy to OAA***

1. Faculty Personnel Appointment Form (PAF 500) – signed/countersigned by appropriate Department Chair(s) and/or Center Director(s). (Please note the HR Posting Number on the form in the appropriate spot.). **Note: Research Associate Professors should not be paid 100% from a GR 5 account.**
2. Original signed offer letter
3. One copy of Employment Eligibility Verification (I-9) form – Attach legible copy/copies of proof of citizenship (U.S. citizen) or work authorization (non-U.S. citizen)
4. Copy of [Intellectual Property Agreement Form](#) – (original IPA should be forwarded to ORPA)
5. [Affirmative Action Form](#) – form is only for the use of the Academic Affairs Office and will not be forwarded to the HR Service Center

### ***PLEASE SUBMIT ITEMS 6 – 9 VIA the Promotion & Reappointment Manager (PRM)***

6. Department Chair/Center Director recommendation letter – Must include information regarding the funding sources from which the faculty member's salary will be paid throughout the term of the appointment
7. Current Curriculum Vitae

**NOTE: FOR ITEMS 8 AND 9 – ALL RECEIVED LETTERS OF RECOMMENDATION MUST BE INCLUDED, REGARDLESS OF CONTENT, IN THE APPOINTMENT PACKET.**

8. Internal referee letters (2-4)
9. External referee letters (2-4)