



SCHOOL OF
**MEDICINE &
DENTISTRY**

UNIVERSITY *of* ROCHESTER
MEDICAL CENTER

REQUIRED PAPERWORK FOR
SMD FACULTY
PERSONNEL ACTIONS

November 2025

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General Information

Office for Academic Affairs Team

Judith F. Baumhauer, MD, MPH, Vice Dean for Academic Affairs (VDAA)

Judy_Baumhauer@urmc.rochester.edu / 585-275-3030

Tammy Michielsen, Director

Provide leadership and support for academic affairs, serving as liaison to University-wide offices, advising on policy and procedures governed by the SMD Regulations of the Faculty and the University Faculty Handbook. Tammy_michielsen@urmc.rochester.edu / 585-275-3030

Lori McBride, Senior Faculty Affairs Administrator

Administrative team lead for the appointment, reappointment and promotion process for junior faculty levels, faculty leave of absence, faculty search postings, recruitment forms, and offer letters for all faculty ranks.

Lori_McBride@urmc.rochester.edu / 585-275-2747

Grace Kane, Faculty Affairs Administrator II

Appointments, reappointments and promotions at senior faculty levels; primary contact for activities of the MEDSAC Steering committee; Promotions and Reappointment Manager (PRM) processes and document review.

Grace_Kane@urmc.rochester.edu / 585-275-3509

Kelly Chandler, Faculty Affairs Administrator II

Faculty Professionalism Council liaison, manage faculty professionalism incident reporting. Review and processing of voluntary junior faculty appointments, facilitate conflict of interest survey and faculty annual reviews, review and process faculty offer letters, process named professorship appointments.

Kelly_Chandler@urmc.rochester.edu / 585-273-2564

JoEllen Gilfus, Administrative Coordinator III

Support administrative needs of the Office of Academic Affairs, primary support for the Vice Dean for Academic Affairs, coordinate and schedule MEDSAC Steering Committee meetings, Provost and Board of Trustee actions, SMD Faculty Council and events for the Office of Academic Affairs. Facilitate web page edits.

JoEllen_Gilfus@urmc.rochester.edu / 585-275-6321

Britney Swanger, Administrative Coordinator III

Support administrative needs of the Office of Academic Affairs, primary support for Administrative Director. Triage and route incoming faculty appointment paperwork for the OAA team, coordinate faculty orientation, professional service reappointment review, web site updates and edits. Review faculty postings and recruitment forms for approval.

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Office for Academic Affairs – Important Links and Information

- Academic Affairs Homepage: <http://oaa.urmc.edu>
- SMD Regulations of the Faculty: [SMD Regulations of the Faculty](#) (*revised October 2017*)
- UR Faculty Handbook:
http://www.rochester.edu/provost/assets/PDFs/Faculty_handbook.pdf (*updated October 2021*)
- Faculty Roster – Developed and managed by OAA, Faculty Roster is a comprehensive database of faculty appointment information in the School of Medicine & Dentistry. Faculty Roster is used to track and manage all faculty appointments. Contact Tammy Michielsens or Lori McBride for access.
- UR Faculty – Faculty Information System (Powered by Interfolio). A University project with the goal to increase operational efficiencies and data processing, The first of four modules initiated in June 2023, Faculty Search, to facilitate Faculty Postings and Recruitment. Additional modules will be added later 2023 into 2024.
- Recruitment Form: Recruitment forms are required for all full-time or paid part-time faculty (0.5 FTE or greater) positions. The Faculty Recruitment Form is continually revised and updated to reflect current financial data; please ensure you download the current version from the OAA website. Job postings may be processed independently of the recruitment form so the position may be posted to FIS/UR Faculty to begin the mandatory 30-day posting period. See [Recruitment Form and Offer Letter Process](#) for details.
- Offer Letters: All offer letters for paid faculty [full-time (1FTE) and part-time (0.5FTE or greater)], and TAR (.49 FTE or less) *regardless of rank*.
 - Require the signatures of the Department Chair (and Center Director, when applicable) *and* the Dean of the School of Medicine and Dentistry and must utilize the standard offer letter template and relevant standard terms and conditions document (see your Office of Counsel representative for this template and document).
 - All offer letters must be approved by the Office of Counsel prior to forwarding to Academic Affairs.
 - All offer letters must come to the [Office of Academic Affairs](#) who will facilitate Dean review and signature.
 - An approved recruitment form must be on file in Academic Affairs in order for an offer letter to be signed for all offer letters 0.5 FTE or greater.
 - Offer letter templates are found in Box/ Offer Letter Materials – one primary department staff member who facilitate offer letters is granted access. Please be sure to notify the Office of Academic Affairs if/when there needs to be a change in access.

- Drug Screening: A drug screen is required for all new paid faculty (full-time, part-time, and TAR) and some visiting faculty, and anyone who requires a medical staff appointment. The drug screen is included as part of the initial credentialing process for the medical staff appointment. For those *not* requiring a new medical staff appointment, current voluntary faculty member that will now be paid by UR, departments should schedule the drug screening appointment with Employee Health as “research only”. This stipulation is in the Standard Terms of Employment document that all new paid hires agree to when they sign their offer letter. It is the hiring department’s responsibility to facilitate a drug screening appointment for incoming faculty.
- I-9: It is the responsibility of the hiring department to ensure that each candidate completes the I-9 prior to their start date. OAA will verify I-9 completion prior to approving a faculty appointment. Due to the highly confidential nature of the I-9, please do not submit the I-9 or supporting documentation to OAA.
- Faculty Demographics Form: The form can be found at Appendix G; note this form is only for Dean’s Office use and will not be forwarded to the HR Service Center.
- Intellectual Property Agreement Form (IPA): Signed, original IPA should be forwarded to the Office of Research & Project Administration (ORPA, Box 270140); a copy of the IPA should be included with original appointment packet as appropriate. Link to form (*revised 11/2009*): http://www.rochester.edu/orpa/_assets/pdf/form_ipa.pdf
- Explanation of Full-Time vs. Part-Time: Full-Time faculty are 1 FTE (full-time effort) and are entitled to full-time faculty benefits. Part-Time faculty are 0.5 FTE - 0.99 FTE and are entitled to part-time faculty benefits.
- When dropping below 0.5 FTE, the faculty member’s appointment must change to TAR (Time-as-reported). There are statutory limited benefits associated with the TAR rank by which the University must abide. An offer letter or contract is required for faculty changing from full or part-time to a TAR status.
- OAA *may* make an exception to coding a faculty member as TAR, the statutory limitation on benefits remains. Please contact OAA with any questions.
- Promotion and Reappointment Manager System (PRM): *Initial Appointments, Promotions and Reappointments at Senior Faculty ranks* should be submitted via PRM as noted in the relevant sections of the Required Paperwork. PRM should not be used for joint appointments, changes of status, or for faculty whose appointment has lapsed. If a faculty member’s appointment has lapsed, action is possible only after the faculty member’s appointment has been made current. Please contact Grace Kane with questions.

- Template Letters: The OAA website section [For Department Chairs, Center Directors, and Administrators](#), provides several template letters, including:
- A template is available for each possible component combination as follows:
 - [C-S-T \(Clinical, Scholarship and Teaching\)](#)
 - [C-T \(Clinical and Teaching\)](#)
 - [IS-CT \(Institutional Scholarship and Clinical Teaching\)](#)
 - [I-S-T \(Institutional Scholarship and Teaching\)](#)
 - [R-C-T \(Research, Clinical and Teaching\)](#)
 - [RT \(Research and Teaching\)](#)
 - [ST \(Scholarship and Teaching\)](#)

[Template for Chair's Letter Requesting Referee Letters for Promotion/Tenure Packets Template for Chair's Letter to the Dean's Office Proposing Promotion](#)

- Letters of Recommendation: Letters of recommendation should be written by those at the same rank as the proposed rank, or higher. For example, for appointment, reappointment, or promotion to the rank of Associate Professor, Recommendations should generally be written by those at the rank of Associate Professor (and above). Any questions should be directed to the Office of Academic Affairs.
- All received letters of recommendation, regardless of content, must be included in the appropriate appointment, promotion, or reappointment packet. Departments may not choose and include only those letters they feel are the most complimentary.
- Internal Referees: Any faculty member with an appointment at the University of Rochester is considered “internal” – this includes all faculty with a “voluntary” appointment and all faculty with appointments in any of the other Schools (Arts, Sciences, & Engineering, Eastman, Nursing, Simon, Warner).
- Joint Faculty Appointments: Per the [SMD Regulations of the Faculty](#) (pg.17), Faculty members may hold full- or part-time appointments in more than one department, ordinarily at the same rank as in the primary department. Joint appointments are functional and not honorific in nature. They are intended to benefit both the faculty member and joint department by enhancing collaboration in teaching, research, clinical programs, and in other activities of the joint department. Reminder that joint appointment end dates may not exceed the term of the primary appointment, and faculty with tenured primary appointments are limited to a three-year term in their secondary appointment(s).
- Voluntary Faculty or Department Fellow Changing to Employed Status: A Faculty Recruitment Form is required for any faculty member moving from a voluntary faculty or departmental fellow position to a paid faculty position at part-time (0.5 FTE) or greater. When moving to a paid faculty position, a completed I-9, an Intellectual Property Agreement (IPA), and a Faculty Demographics Form are required, if not previously submitted.

- Reappointment of Assistant Professor: Reappointment of an Assistant Professor at the completion of the first appointment period requires a preceding departmental review of performance and of the faculty member's contributions as related to specific activity components, i.e., Research, Scholarship, Institutional Scholarship, Clinical, and Teaching, which the department chair and faculty member may have previously selected or are prepared to select for their career development.
- Departmental review is considered one of the more important points in the academic career of junior faculty. *Please see the following pages: 8-9 (SMD Regulations of the Faculty) and Appendix D.* Do note this assessment letter becomes the faculty member's reappointment letter, and they will receive a copy of the letter after the Dean concurs with the reappointment.
- Secondary Faculty appointment for Trainees: For those in ACGME Accredited Fellowships, to be granted a secondary appointment as Instructor, a letter of approval is required from the Office of Compliance allowing the trainee to practice/bill for services outside the scope of the training program. Departments should upload required paperwork supporting the addition or reappointment of a secondary instructor appointment to Academic Affairs in Box so that the secondary appt can be reviewed appropriately.
- Salary source(s) for Research Assistant Professors, Research Associate Professors, and Research Professors: *Faculty in these ranks should not be paid 100% from a GR5 (grant) account.*
- Terminations: *All 510 forms terminating faculty appointments must be signed by the Chair or Center Director and routed to OAA for the signature of the Vice Dean for Academic Affairs.* A letter of resignation is required for any faculty member at the level of Assistant Professor or higher. In the "remarks" section of the 510, please indicate the faculty member's new employer or future plans, if known. See page 27 of the Required Paperwork for further guidance. If the Chair chooses not to reappoint a faculty member, this must be first reviewed with the Vice Dean for Academic Affairs. Letters of non-reappointment should include appropriate notice and be vetted by the Office of Counsel and the Vice Dean for Academic Affairs prior to being presented to the faculty member. Please contact OAA to discuss process and requirements.
- Other Common Issues: Please refer to the [SMD Regulations of the Faculty](#) for guidance on Policy & Procedures for Extending the "Academic Clock", Appointment length by faculty rank, Assistant Professor Appointment length, etc.
- Vacation Payout: Per the Chief Financial Officer of the UR Medical Center, there is no pay out of unused faculty vacation days.
- eCV: All full-time and paid part-time faculty are required to have an eCV. New paid faculty are required to have their CVs in the [eCV database](#) within 30 days of hire. This is required because the faculty webbios on the URM website are fed by the eCV. Please note that many faculty members may prefer to keep a Word document with their full CV; they are strongly encouraged to use the CV template found in the [SMD Regulations of the Faculty, Appendix II](#).
- Medical Staff Appointment: For new faculty requiring a Medical Staff appointment OAA will contact Medical Staff Services to ensure the "file is clear". Academic Affairs will then proceed with the faculty appointment.
 - o Academic Affairs cannot proceed with the faculty appointment until this clearance is received.

PROFESSOR, ASSOCIATE PROFESSOR* and RESEARCH PROFESSOR

INITIAL APPOINTMENT:

Ad hoc committee review, MEDSAC Steering Committee approval, and Provost approval required for initial appointment. University Board of Trustees approval required for initial appointment with tenure.

Associate Professor and Professor: must be appointed on the basis of components (Research, or Scholarship, or Institutional Scholarship, and/or Clinical, and Teaching), national leadership and international reputation, independent funding (principal investigator), peer-reviewed publications (first/senior author), and invited national presentations. These appointments are typically for five years or with tenure, if in tenurable components. Please see pages 9-12 in the SMD Regulations of the Faculty for details.

Research Professor: must be appointed on the basis of national leadership and international reputation, independent funding (principal investigator), peer-reviewed publications (first/senior author), and invited national presentations. Research Professors may be appointed for one to five years.

PLEASE SUBMIT ITEMS 1 – 5 to OAA via BOX

1. Faculty Personnel Appointment Form (PAF 500) – signed/counter signed by appropriate Department Chair(s) and/or Center Director(s). (Please note the HR Posting Number on the form). Note: Research Professors should not be paid 100% from a GR5 (grant) account.
2. Original signed offer letter
3. Employment Eligibility Verification (I-9) form – please ensure the candidate completes the I-9 prior to their start date. OAA will verify I-9 completion with HR. Do not submit the I-9 or supporting information to OAA.
4. Copy of Intellectual Property Agreement Form – (original IPA should be forwarded to ORPA, Box 270140)
5. Faculty Demographics Form – this form is only for the use of OAA and will not be forwarded to the HR Service Center
6. Completed Faculty Recommendation Form

PLEASE SUBMIT ITEMS 6 – 10 VIA the Promotion & Reappointment Manager (PRM)

7. Department Chair/Center Director recommendation letter (*for Research Professor, letter must identify funding source(s) for salary for the entire appointment period*). (For joint appointment(s) include recommendation letter from appropriate Department Chair/Center Director)
8. Current Curriculum Vitae
FOR ITEMS 8 AND 9 – ALL LETTERS OF RECOMMENDATION RECEIVED MUST BE INCLUDED, REGARDLESS OF CONTENT, IN THE APPOINTMENT PACKET. Letters of recommendation should be written by those at the same rank as the proposed rank, or higher.
9. Internal referee letters (4-8) (*Internal referees are defined as any member of the UR faculty; includes all full-time, part-time, and voluntary faculty*)
10. External referee letters (4-8) Use template request letter and include External Reviewer Relationship to Candidate Form
11. Selected reprints of most significant recent publications (3-5 from the last 3 years)

*The requirements for academic part-time Associate Professors and Professors are the same. Those faculty have previously been designated as such and their efforts are 50% or greater.

Promotion and/or Tenure in the Associate Professor* Professor. Research Professor Ranks

*Therequirementsforacademicpart-time Associate ProfessorsandProfessors arethesame.Thosefaculty havepreviously been designated as such and their efforts are 50% or greater.

All require: Ad hoc committee review, MEDSAC Steering Committee approval, Provost approval
In addition, University of Trustees approval is required for promotions with tenure.

Consideration for promotion to **Associate Professor and Professor** must be based on:

At least one Activity Component:

Research, Scholarship, Institutional Scholarship, and/or Clinical and all require Teaching

Plus: Service, Leadership and National/International Recognition

Research

Independent funding (principal investigator) Peer-reviewed publications (first, second author) Invited national presentations

To Research Professor

National leadership and international reputation, **in addition** to list of research requirements above

For Promotion with tenure

Associate Professor: Research or Institutional Scholarship, and/or Clinical and Teaching Professor:

Research, or Scholarship, or Institutional Scholarship and/or Clinical and Teaching

MATERIALS

Upload to Box

Faculty Personnel Action Form (PAF510).

Research Professors cannot be paid 100% from a GR 5 (grant) account.

[Completed Faculty Recommendation Form](#)

Upload to PRM (Promotion and Reappointment Manager)

1. Department Chair/Center Director recommendation letter

1. Research Professor letters must identify funding source(s) for funding for the entire Appointment period.
2. For joint appointments, include recommendation letter from appropriate joint appointment chair/director

2. Current Curriculum Vitae: Follow URSMD format found in the [SMD Regulations of the Faculty](#), pages 38-40), or eCV format

3. Letters of Recommendation

Must be from those at the same rank as the proposed rank or higher. All letters received must be submitted with case materials

- 3a. Internal referee letters (4-8)

Internal referees are members of the UR faculty, including FT, PT, voluntary

- 3b. [External referee letters \(4-8\). Use template request letter.](#)

3c. [External referee relationship to candidate form](#)

4. Assessment forms

- Self-Assessment (see [Appendix C](#))
- Self-Assessment of Teaching or Teaching Portfolio
- Peer-Evaluation of Teaching (one is required)
- Self-Assessment of Research, Scholarship, or Institutional Scholarship, as applicable
(not required for those with Clinical and Teaching component only)
- Self-Assessment of Clinical Contributions (optional for those with Clinical component)
- Self-Assessment of Diversity, Equity & Inclusion (optional for all faculty)

5. Selected reprints of most significant recent publications (3-5 from last 3 years)

PROFESSOR, ASSOCIATE PROFESSOR* and RESEARCH PROFESSOR

REAPPOINTMENTS:

MEDSAC Steering Committee approval and Provost approval required for reappointment.

(For reappointment terms please see pages 9-12 in the [*SMD Regulations of the Faculty*](#))

PLEASE SUBMIT ITEM 1 to OAA via BOX

1. Faculty Personnel Action Form (PAF510). *Note: Research Professors should not be paid 100% from a GR5 (grant) account.*
2. Completed [Faculty Recommendation Form](#)

PLEASE SUBMIT ITEMS 2 – 5 VIA the Promotion & Reappointment Manager (PRM)

3. Department Chair/Center Director recommendation letter or Department Chair/Center Director attestation document (*for Research Professor, letter must identify funding source(s) for salary for the entire appointment period*). (For joint appointment(s) include attestation form from appropriate Department Chair/Center Director)
4. Current Curriculum Vitae—following either UR SMD (see Appendix II of the [*SMD Regulations of the Faculty*](#), pages 38-40), or eCV Format
Internal and External referee letters are optional. ALL RECEIVED LETTERS OF RECOMMENDATION MUST BE INCLUDED, REGARDLESS OF CONTENT, IN THE REAPPOINTMENT PACKET. Letters of recommendation should be written by those at the same rank as the proposed rank, or higher.

Note: Internal referees are defined as any member of the UR faculty; includes all full-time, part-time, and voluntary faculty

*The requirements for academic part-time Associate Professors and Professors are the same. Those faculty have previously been designated as such and their efforts are 50% or greater.

PROFESSIONAL SERVICE

Professor of Clinical and Associate Professor of
Clinical

VOLUNTARY FACULTY

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

INITIAL APPOINTMENT:

Professor of Clinical, Associate Professor of Clinical, and Clinical Professor: MEDSAC Steering Committee and Provost approval required for initial appointment.

Clinical Associate Professor: Provost approval required for initial appointment.

PLEASE SUBMIT ITEMS 1-5 to OAA via BOX

1. Faculty Personnel Action Form (PAF500) – signed/counter signed by appropriate Department Chair(s) and/or Center Director(s). (Please note the HR Posting Number on the form)
2. Original signed offer letter or professional service contract, e.g., Primary Care contract. (Offer letter is required only if faculty member is to be paid)
3. Employment Eligibility Verification (I-9) form – please ensure the candidate completes the I-9 prior to their start date. OAA will verify I-9 completion with HR. Do not submit the I-9 or supporting information to OAA. Note: the I-9 is not required for voluntary faculty if they are unpaid.
4. Copy of [Intellectual Property Agreement Form](#) – (original IPA should be forwarded to ORPA, Box 270140)
5. Faculty Demographics Form – form is only for the use of OAA and will not be forwarded to the HR Service Center.
6. Completed [Faculty Recommendation Form](#)

PLEASE SUBMIT ITEMS 6–8 VIA the Promotion & Reappointment Manager (PRM)

7. Department Chair recommendation letter (For joint appointment(s) include recommendation letter from appropriate Department Chair(s))
8. Current Curriculum Vitae
9. 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. Letters of recommendation should be written by those at the same rank as the proposed rank, or higher.

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 Provost approval required for promotion.

Clinical Associate Professor: Provost approval required for promotion.

PLEASE SUBMIT ITEM 1 to OAA via BOX

1. Faculty Personnel Action Form (PAF510).

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 UR SMD (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. Letters of recommendation should be written by those at the same rank as the proposed rank, or higher.

REAPPOINTMENTS:

Professor of Clinical, Associate Professor of Clinical, Clinical Associate Professor, and Clinical Professor:
Provost approval required for reappointment.

PLEASE SUBMIT ITEM 1 to OAA via BOX

1. Faculty Personnel Action Form (PAF510)
2. Current, valid email address for the faculty member
3. Completed [Faculty Recommendation Form](#)

PLEASE SUBMIT ITEM 3 VIA the Promotion & Reappointment Manager (PRM)

4. Department Chair recommendation letter OR Chair attestation document (For joint appointment(s) include attestation document from appropriate Department Chair(s))

RESEARCH ASSOCIATE PROFESSOR

INITIAL APPOINTMENT:

MEDSAC Steering Committee and Provost approval required for initial appointment.

PLEASE SUBMIT ITEMS 1-5 to OAA via BOX

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.)..
2. Original signed offer letter
3. Employment Eligibility Verification (I-9) form – please ensure the candidate completes the I-9 prior to their start date. OAA will verify I-9 completion with HR. Do not submit the I-9 or supporting information to OAA.
4. Copy of [Intellectual Property Agreement Form](#) – (original IPA should be forwarded to ORPA, Box 270140)
5. Faculty Demographics Form – form is only for the use of the Academic Affairs Office and will not be forwarded to the HR Service Center
6. Completed [Faculty Recommendation Form](#)

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

7. 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
8. Current Curriculum Vitae
FOR ITEMS 8 AND 9 – ALL RECEIVED LETTERS OF RECOMMENDATION MUST BE INCLUDED, REGARDLESS OF CONTENT, IN THE REAPPOINTMENT PACKET. Letters of recommendation should be written by those at the same rank as the proposed rank, or higher.
9. Internal referee letters (2-4)
10. External referee letters (2-4) Use template request letter and include External Reviewer Relationship to Candidate Form

RESEARCH ASSOCIATE PROFESSOR

PROMOTIONS:

MEDSAC Steering Committee and Provost approval required for promotion.

PLEASE SUBMIT ITEM 1 to OAA via BOX

1. Faculty Personnel Action Form(PAF510).Hard copy must be submitted to the Office of Academic Affairs.
Note:Research Associate Professors should not be paid100% from aGR5(grant)account.

PLEASE SUBMIT ITEMS 2 – 5 VIA the Promotion & Reappointment Manager (PRM)

2. 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
3. Current Curriculum Vitae–following either UR SMD(see Appendix II of the [SMD Regulations of the Faculty](#), pages38-40), or eCVformat
FOR ITEMS 4 AND 5 – ALL RECEIVED LETTERS OF RECOMMENDATION MUST BE INCLUDED, REGARDLESS OF CONTENT, IN THE REAPPOINTMENT PACKET. Letters of recommendation should be written by those at the same rank as the proposed rank, or higher.
4. Internal refereeletters(2-4)
5. External refereeletters(2-4)
6. Completed [Faculty Recommendation Form](#)

REAPPOINTMENTS:

Provost approval required for reappointment

PLEASE SUBMIT ITEM 1 to OAA via BOX

1. FacultyPersonnelActionForm(#510).Note:ResearchAssociateProfessorsshould not bepaid 100% from a GR 5 (grant) account.

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

2. Department Chair/Center Director recommendation letter OR Chair/Center Director attestation document – Must include information regarding the funding sources from which the faculty member's salary will be paid throughout the term of the appointment
3. Letters of recommendation (internal or external) areoptionalforreappointment

For the appointments on the following pages (pages 19-28), all documents must be submitted to the Office of Academic Affairs electronically via BOX. The Promotion and Reappointment Manager (PRM) is not currently used for these appointments. Please contact OAA with questions.

ASSISTANT PROFESSOR
(Full-Time or Part-Time)

Submit all documents to the Office of Academic Affairs *via* **BOX**.

INITIAL APPOINTMENT

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)
2. Original signed offer letter
3. Employment Eligibility Verification (I-9) form – please ensure the candidate completes the I-9 prior to their start date. OAA will verify I-9 completion with HR. Do not submit the I-9 or supporting information to OAA.
4. Copy of [Intellectual Property Agreement Form](#) – (original IPA should be forwarded to ORPA, Box 270140)
5. Faculty Demographics Form – form is only for the use of the Academic Affairs Office and will not be forwarded to the HR Service Center
6. Completed [Faculty Recommendation Form](#)
7. Department Chair/Center Director recommendation letter. (For joint appointment(s) include recommendation letter from appropriate Department Chair(s))
8. Current Curriculum Vitae
9. Referee letters are optional:
 - If letters are requested, past rules apply
 - Letters may be internal or external and written by those at the same rank as the proposed rank of the candidate or higher
 - Any letters received must be submitted to OAA for processing of the appointment

PROMOTIONS

10. Faculty Personnel Action Form (PAF 510)
11. Completed [Faculty Recommendation Form](#)
12. Department Chair/Center Director recommendation letter. (For joint appointment(s) include recommendation letter from appropriate Department Chair(s))
13. Current Curriculum Vitae– following either URSMD (see Appendix II of the [SMD Regulations of the Faculty](#), pages 38-40), or eCV format
14. Referee letters are optional:
 - If letters are requested, past rules apply
 - Letters may be internal or external and written by those at the same rank as the proposed rank of the candidate or higher
 - Any letters received must be submitted to OAA for processing of the appointment

ASSISTANT PROFESSOR
(Full Time or Part-Time)

Submit all documents to the Office of Academic Affairs *via BOX*

REAPPOINTMENTS:

1. Faculty Personnel Action Form (PAF510)
2. Completed [Faculty Recommendation Form](#)
3. Department Chair/Center Director recommendation letter for reappointment following format of templates provided on the OAA webpage—see [Appendix E](#) of Required Paperwork and refer to pages 8 and 9 in the [SMD Regulations of the Faculty](#) as well as [Appendix D](#) for further information on the departmental evaluation of Assistant Professors. (For joint appointment(s) include recommendation letter or attestation form from appropriate Department Chair(s)).
 - i. Additionally, the Department Chair/Center Director recommendation letter must include the Deans concurrence sentence, at the end of the letter, with the appropriate components, to be signed by the Dean, School of Medicine & Dentistry.
4. Current Curriculum Vitae—following either UR SMD (see Appendix II of the [SMD Regulations of the Faculty](#), pages 38-40), or eCV format

Referee letters are optional:

- If letters are requested, past rules apply
 - Letters may be internal or external and written by those at the same rank as the proposed rank of the candidate or higher
 - Any letters received must be submitted to OAA for processing of the appointment

RESEARCH ASSISTANT PROFESSOR

Submit all documents to the Office of Academic Affairs *via* BOX.

INITIAL APPOINTMENT:

1. Faculty Personnel Appointment Form (PAF500)–signed/counter signed by appropriate Department Chair(s) and/or Center Director(s). (Note the HR Posting Number on the form). *Note: Research Assistant Professors should not be paid 100% from a GR 5 (grant) account.*
2. Original signed offer letter
3. Employment Eligibility Verification (I-9) form – please ensure the candidate completes the I-9 prior to their start date. OAA will verify I-9 completion with HR. Do not submit the I-9 or supporting information to OAA.
4. Copy of [Intellectual Property Agreement Form](#)–(original IPA should be forwarded to ORPA, Box 270140)
5. Faculty Demographics Form–form is only for the use of OAA and will not be forwarded to the HR Service Center
6. Completed [Faculty Recommendation Form](#)
7. 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*
8. Current Curriculum Vitae
9. Referee letters are optional:
 - If letters are requested, past rules apply
 - Letters may be internal or external and written by those at the same rank as the proposed rank of the candidate or higher
 - Any letters received must be submitted to OAA for processing of the appointment

PROMOTIONS:

1. Faculty Personnel Action Form (PAF510). *Note: Research Assistant Professors should not be paid 100% on a GR 5 account.*
2. Completed [Faculty Recommendation Form](#)
3. 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
4. Current Curriculum Vitae – following either UR SMD (see Appendix II of the [SMD Regulations of the Faculty](#), pages 38-40), or eCV format

REAPPOINTMENTS:

1. Faculty Personnel Action Form (PAF510) *Note: Research Assistant Professors should not be paid 100% from a GR 5 (grant) account.*
2. 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.
3. [Faculty Recommendation Form](#)

ASSISTANT PROFESSOR OF CLINICAL
SENIOR INSTRUCTOR
SENIOR INSTRUCTOR OF CLINICAL
INSTRUCTOR
INSTRUCTOR OF CLINICAL
SENIOR ASSOCIATE, ASSOCIATE, AND
ASSISTANT (Full-time and part-time)

Submit all documents to the Office of Academic Affairs *via* **BOX**.

INITIAL APPOINTMENT:

1. Faculty Personnel Appointment Form(PAF500)– signed/counter signed by appropriate Department Chair(s) and/or Center Director(s). (Note the HR Posting Number on the form)
2. Original signed offer letter (non-AC GME fellow offer letter for Instructors with fellowships)
3. Employment Eligibility Verification (I-9) form – please ensure the candidate complete the I-9 prior to their start date. OAA will verify I-9 completion with HR. Do not submit the I-9 or supporting information to OAA.
4. Copy of [Intellectual Property Agreement Form](#) – (original IP A should be forwarded to ORPA, Box 270140)
5. Faculty Demographics Form – form is only for the use of the Academic Affairs Office and will not be forwarded to the HR Service Center
6. Completed [Faculty Recommendation Form](#)
7. Department Chair/Center Director recommendation letter. (For joint appointment(s) include recommendation letter from appropriate Department Chair(s))
8. Current Curriculum Vitae

PROMOTIONS:

1. Faculty Personnel Action Form(PAF510)
2. Completed [Faculty Recommendation Form](#)
3. Department Chair/Center Director Recommendation letter. (For joint appointment(s) include recommendation letter from appropriate Department Chair(s))
4. Current Curriculum Vitae – following either UR SMD (see Appendix II of the [SMD Regulations of the Faculty](#), pages 38-40), or eCV format

REAPPOINTMENTS:

1. Faculty Personnel Action Form(#510) – Include copy of signed professional service contract, when relevant.
2. Completed [Faculty Recommendation Form](#)

VOLUNTARY FACULTY

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

Submit all documents to the Office of Academic Affairs *via BOX*.

INITIAL APPOINTMENT:

1. Faculty Personnel Appointment Form (PAF 500) – Must be signed/counter signed by appropriate Department Chair(s) and/or Center Director(s). (Note the HR Posting Number on the form, if appropriate).
2. Original signed offer letter (required only if the faculty member will be paid).
3. Only if a paid appointment: please ensure the candidate completes the I-9 prior to their start date. OAA will verify I-9 completion with HR. Do not submit the I-9 or supporting information to OAA. If unpaid: the I-9 is not required.
Note: If there is any possibility of the faculty member receiving any salary, compensation, honorarium, etc., the I-9 is mandated.
4. Completed [Faculty Recommendation Form](#)
5. Department Chair/Center Director recommendation letter – Must be signed/countersigned by appropriate Department Chair(s) and/or Center Director(s). For joint appointment(s), include recommendation letter from appropriate Department Chair(s) and/or Center Director(s).
6. Current Curriculum Vitae

PROMOTIONS:

1. Faculty Personnel Action Form (PAF 510)
2. Completed [Faculty Recommendation Form](#)
3. Department Chair/Center Director recommendation letter – Must be signed/countersigned by appropriate Department Chair(s) and/or Center Director(s). For joint appointment(s), include recommendation letter from appropriate Department Chair(s) and/or Center Director(s).
4. Current Curriculum Vitae—following either UR SMD (see Appendix II of the [SMD Regulations of the Faculty](#), pages 38-40, or eCV format.

REAPPOINTMENTS:

1. Faculty Personnel Action Form (PAF 510)
2. Current, valid email address for the faculty member
3. Completed [Faculty Recommendation form](#)

JOINT ADMINISTRATIVE POST APPOINTMENTS

- Joint faculty appointments *cannot exceed* the term of the primary faculty appointment.
- For tenured faculty, joint appointments *cannot exceed* a three-year term.
- Associate Professor and above ranks require Provost approval (upload all documentation to department folder in Box).

INITIAL APPOINTMENT:

1. Faculty Personnel Action Form (PAF500 or PAF510) – signed by the primary Department Chair and secondary Department Chair(s) and/or Center Director(s)
2. Completed [Faculty Recommendation Form](#)
3. Joint Department Chair/Center Director recommendation letter- Must be signed by both the primary Department Chair and the secondary Department Chair(s) and/or Center Director(s)
4. Current Curriculum Vitae—following either UR SMD (see Appendix II of the [SMD Regulations of the Faculty](#), pages 38-40), or eCV format

REAPPOINTMENTS:

1. Faculty Personnel Action Form (PAF510)- signed by primary Department Chair and secondary Department Chair(s) and/or Center Director(s)
2. Joint Department Chair/Center Director recommendation letter.
3. Completed [Faculty Recommendation Form](#)

PROMOTIONS:

1. Faculty Personnel Action form – signed by primary and secondary dept chair/center director
2. Joint Department Chair/Center Director recommendation letter
3. Completed [Faculty Recommendation Form](#)

ADJUNCT and VISITING FACULTY APPOINTMENTS

(At any faculty rank)

Submit all documents to the Office of Academic Affairs *via BOX*.

INITIAL APPOINTMENT:

1. Faculty Personnel Appointment Form (PAF 500) – Must be signed/countersigned by appropriate Department Chair(s) and/or Center Director(s). (Note the HR Posting Number on the form, if appropriate).
2. Only if a paid appointment: please ensure the candidate completes the I-9 prior to their start date. OAA will verify I-9 completion with HR. Do not submit the I-9 or supporting information to OAA.
If unpaid: I-9 completion is not required.
Note: If there is any possibility of the faculty member receiving any salary, compensation, honorarium, etc., the I-9 is mandated.
3. [Intellectual Property Agreement \(IPA\) Form](#) or [Visiting Scientist Agreement \(VSA\)](#). The original IPA or VSA should be forwarded to ORPA (Box 270140), and a copy provided to the Office of Academic Affairs.
If the faculty member will be participating in University research using significant University Resources (defined [here](#)), the VSA is required.
If the faculty member's involvement is solely teaching, clinical, or research not involving significant University Resources, the IPA or VSA is not required. It is the responsibility of the Department Chair to make this determination. The University's policy on Significant Use of University Resources and Intellectual Property Ownership is available [here](#).
Examples:
Dr. Smith, a physician in private practice, will teach a skills course for three hours. No IPA or VSA is required. Dr. Jones, a staff physician at Alpha Hospital in Anywhere, NY, will refer patients to a clinical trial being performed at the University of Rochester. Dr. Jones has no role in the trial, he is simply referring patients. No IPA or VSA is required.
Dr. Nobel, a faculty member at Science University in Anyplace, MA, will collaborate on a research project with Dr. Investigator at the University of Rochester. As part of this collaboration, Dr. Nobel will use the University's multi photon core and specialized microscopes. The VSA is required.
4. Completed [Faculty Recommendation Form](#)
5. Department Chair/Center Director recommendation letter – Must be signed/countersigned by appropriate Department Chair(s) and/or Center Director(s). For joint appointment(s), include recommendation letter from appropriate Department Chair(s) and/or Center Director(s).
6. Current Curriculum Vitae
7. For Visiting Faculty, not paid by UR, proof of health insurance must be provided.
8. For Adjunct Associate Professor and Adjunct Professor: Provide 1-2 referee letters (may be internal or external referees). Note: Letters of recommendation should be written by those at the same rank as the proposed rank, or higher

ADJUNCT and VISITING FACULTY
APPOINTMENTS (At any faculty rank)

Submit all documents to the Office of Academic Affairs *via* **BOX**.

PROMOTIONS (Adjunct Faculty only):

Adjunct Faculty:

1. Faculty Personnel Action Form (PAF510)
2. Completed [Faculty Recommendation Form](#)
3. Department Chair/Center Director recommendation letter–Must be signed/counter signed by appropriate Department Chair(s)and/or Center Director(s).For joint appointment(s), include recommendation letter from appropriate DepartmentChair(s)and/orCenterDirector(s).
4. Current Curriculum Vitae–following either UR SMD(see Appendix IIofthe [SMD Regulations of the Faculty](#), pages 38-40), or eCVformat.

REAPPOINTMENTS:

Adjunct Faculty:

1. Faculty Personnel Action Form(PAF510)-Must be signed/countersignedby appropriate Department Chair(s)and/orCenterDirector(s).
2. Adjunct Instructor through Adjunct Assistant Professor - ~~either~~a Department Chair/CnterDirector recommendation letter ~~or~~the [Adjunct FacultyReappointment Form](#)(seeAppendixB)
3. Adjunct Associate Professor and Adjunct Professor - Department Chair/CnterDirectorrecommendation letter~~and~~the [Adjunct FacultyReappointmentForm](#)(seeAppendixB)

Visiting Faculty:

1. FacultyPersonnelActionForm(#510)-Must be signed/countersigned byappropriateDepartment Chair(s) and/or CenterDirector(s).
2. DepartmentChair/CenterDirectorrecommendationletter-Mustbe signed/counter signed by appropriate Department Chair(s)and/or Center Director(s).

EMERITUS

- ☐ Emeritus designation granted upon or post-retirement
- ☐ Professor Emeritus or Clinical Professor Emeritus Faculty select one of the following: Emeritus, Emerita, or Emeritx
- ☐ Subject to Board of Trustees approval
- ☐ Faculty should contact Total Rewards to understand benefits with a change in appointment status.

REQUIRED PAPERWORK FOR ALL EMERITUS APPOINTMENTS

1. Completed [Faculty Recommendation Form](#)
2. Department Chair/Center Director recommendation letter – signed by appropriate chair/center director
3. Faculty current CV

PERSONNEL FORMS (510 and/or 500 forms REQUIRED AS FOLLOWS)

A. Retire from paid appt, no rehire

1. 510 to retire primary record
2. Run 500 form to create new record for no pay Emeritus appointment (Job Code 0123)
 - a. Effective date is first date of retirement
 - b. Functional title Professor Emeritus/Emerita/Emeritx
 - c. No end date

B. Retire from paid appt/Rehire as TAR

1. Process 510 to retire on primary record
2. Process 500 form to create new EMPL record, for no pay Emeritus appt (Job Code 0123)
 - a. Effective date is date first of retirement
 - b. Functional title Professor Emeritus/Emerita/Emeritx
 - c. No end date
3. Create 500 form to create 2nd **new** EMPL record, for paid (TAR) appointment (Job Code 0124) – Professor (part-time)
 - a. Annual compensation letter required for TAR appt, with pay and terms of employment (start/end dates)
 - b. TAR appt needs a start and end date

C. Emeritus status post retirement

1. Do not alter the primary (retirement) record
2. Process 500 form to create new record for no pay Emeritus/Emerita/Emeritx appointment
 - a. Job code 0123
 - b. Functional title
3. **If** there is a paid TAR appt in place,
 - a. 510 to Term TAR EMPL record if that appt is ending, OR
 - b. Maintain TAR appt and terminate when the TAR appt ends

D. Voluntary faculty with no pay appointment

- (Faculty member retires from private practice)
- Dept decides to grant Emeritus status (unpaid)
- Dept runs PAF and shows change to Clinical Professor Emeritus (0123)

CHANGE OF STATUS

(All faculty ranks)

Change in Time status(change to or from, full-time, part-time, time-as-reported,or no pay).

Provost approval required for all senior faculty change in status

Submit all documents to the Office of Academic Affairs *via* **BOX**.

1. Faculty Personnel Action Form(PAF 510)–signed/counter signed by appropriate Department Chair(s) and/or Center Director(s) with the appropriate faculty action noted.
2. Chair's letter requesting the change, which must include an explanation for the change request.
3. Documentation of the faculty member's request for the change.
4. Letter from the Department Chair to the faculty member providing appropriate notice of change and describing the change in appointment and compensation.

Note:

- For change from time-as-reported to either a part-or full-time appointment a faculty recruitment form is required. Check with OAA if the new appt is less than a year in length.
- For changes from time-as-reported to either part-or full-time OR from part or full time to TAR a faculty offer letter or contract is required.

Faculty to Trainee:

1. Faculty Personnel Action Form(PAF#510)–signed/counter signed by appropriate Department Chair(s) and/or Center Director(s) with the appropriate action noted.

Note:

- For changes from Faculty to Trainee, Vice Dean for Academic Affairs signature is required.
- Trainees becoming faculty are considered new hires, and the appropriate paperwork for initial appointment at the hire rank should be submitted

For other types of changes(i.e. from Research Assistant Professor to Assistant Professor or from Associate Professor to Associate Professor of Clinical), please contact OAA to determine appropriate paperwork.

TERMINATIONS/DEPARTURES

(All paid time-as-reported, part-time or full-time faculty ranks)

ALL paperwork to end a faculty appointment must be submitted to OAA via BOX.

Resignation/Retirement:

1. Faculty Personnel Action Form (PAF510)–signed by appropriate Department Chair(s) and/or Center Director(s) with the appropriate termination date.
2. [Completed signed Faculty Departure Form](#)

Non-reappointments:

1. Faculty Personnel Action Form (PAF510)–signed by appropriate Department Chair(s) and/or Center Director(s) with the appropriate termination date.
2. Copy of non-reappointment letter given to faculty member with appropriate notice (letter should be vetted by Office of Counsel and the Senior Associate Dean for Academic Affairs prior to being presented to faculty member). Please contact OAA to discuss process and requirements.
3. [Completed signed Faculty Departure Form](#)

Death:

1. Faculty Personnel Action Form (PAF510)–signed by appropriate Department Chair(s) and/or Center Director(s) with the appropriate termination date.
2. Copy of obituary or death notice.
3. Departments should advise family members to contact benefits as soon as possible.

ENDING OF APPOINTMENTS

(Voluntary or no-pay appointments, including visiting and adjunct appointments)

1. Faculty Personnel Action Form (PAF#510)–signed/counter signed by appropriate Department Chair(s) and/or Center Director(s) with the appropriate termination date.

APPENDICES – A THROUGH L

UNIVERSITY OF ROCHESTER SCHOOL OF MEDICINE AND DENTISTRY
Faculty Recommendation Form

Candidate's Name:	
Department:	Division:
Date My URHR Action Initiated:	Date of Birth (for new appointments):
Employee ID Number:	Citizenship/Visa Status and End Date:

Proposed Action (check all that apply):

Appointment ☐

Change in Appointment ☐

Reappointment ☐

Additional Appointment ☐

Promotion ☐

Grant Tenure ☐

APPOINTMENT

Current Title:	
Proposed Title:	
Effective Date:	End Date:

Remarks

My signature represents approval of the appointment action as outlined above

Department Chair

Center Director (if applicable)

Appendix B

ADJUNCT FACULTY REAPPOINTMENT FORM

Name_____

Home Address_____

Primary Institution Affiliation_____

Title/Rank at Primary Institution_____

Business Address_____

Email_____

End Date of Current Adjunct Appointment_____

- 1) Time spent teaching in the School of Medicine and Dentistry
 - a. Course(s)
 - b. Dates of participation
 - c. Hours

- 2) Time spent on-site doing research.
 - a. Grants on which you are named principal investigator and faculty at the University of Rochester are named co-investigator (include title, agency, and grant period)

 - b. Grants on which you are named co-investigator (include title, agency, and grant period)

 - c. Other research collaborations

- 3) Other on-site activities

- 4) Comments

APPENDIX C

- i. Faculty Member's Self-Assessment of contributions to an inclusive and welcoming learning environment
- ii. Evaluation of Faculty Contributions to Teaching
- iii. Faculty Member's Self-Assessment of Clinical Contributions
- iv. Faculty Member's Self-Assessment of Research and/or Other Scholarly Contributions

APPENDIX C-i

Faculty Member's Self-Assessment of contributions to an inclusive
and welcoming learning environment

(Optional for all senior academic promotions)

NameofCandidate: _____

Faculty Member's Self-Assessment of contributions to an inclusive and welcoming learning environment

Limiting your comments to one page, please describe your contributions to inclusion and learning within the work environment. Please also describe your contributions in terms of content area, collaborators or constituents, approach or methods. These contributions may include any of the activity domains listed on your CV or outlined in the SMD Regulations of the Faculty, including clinical contributions, teaching and education, research or other forms of scholarship, community engagement, or service/leadership/national recognition.

Please give examples of contributions of inclusion and learning to the work environment, which may include formal assessments from collaborators or constituents; quality or productivity metrics as applicable; or regional, national, or international recognition for your expertise or achievements.

APPENDIX C-ii

Evaluation of Faculty Contributions to Teaching

(Required for all senior academic promotions)

Name of Candidate: _____

TEACHING

Evaluation of Faculty Contributions to

Teaching: Outline for Compilation

Essential Elements:

1. Faculty Member's Self-Assessment.
2. Peer Evaluation by faculty member(s), based on direct observation. Evaluators may choose to use the Peer Evaluation of Faculty Contributions to Teaching form (below), or the evaluation may take the form of a letter.
3. Written materials (syllabi, special initiatives, reports, etc.) pertaining to education.
4. Summary of student, resident, graduate student evaluations, obtained from data collected by the Offices for Medical Education or Graduate and Postdoctoral Education office, as appropriate.
5. Letter of recommendation from Department Chair/Center Director must include a summary of the quantity and quality of the faculty member's teaching.

Name of Candidate: _____

TEACHING

Faculty Member's Self-Assessment of Teaching Contributions

Please discuss each item; limit your comments to one page.

1. Describe your involvement in teaching and education, which may include any or all of the following: direct teaching (describe learners / context); assessments of learners; curriculum development; mentoring and advising; or educational leadership and administration. For each activity, please convey the nature of your work beyond that portrayed on your CV.

2. Describe your approach to education, supported by educational principles that underlie your teaching and your experience with how people learn. What are your teaching objectives, strategies, and methods? If you have opted to *not* include an educator portfolio, please submit sample syllabi, lecture handouts, or other similar materials as applicable to convey the nature of your teaching.

Name of Candidate _____

: Name of Evaluator: _____

TEACHING

Peer Evaluation of Faculty Contributions to Teaching Peer

Evaluation by faculty member(s), based on direct observation.

An excellent teacher is enthusiastic, knowledgeable and capable of conveying key information in an engaging, challenging manner which invites questions. Such an individual is responsible for timely feedback and when serving as an advisor, commits to responsible on going oversight of the progress of the student's development. Please provide a commentary considering these and other points which will specifically identify the quality of the candidate's teaching. Limit comments to one page. Evaluators may choose to use this form, or the evaluation may take the form of reference letter.

APPENDIX C-iii

Faculty Member's Self-Assessment of Clinical Contributions

*(Optional for all senior academic promotions in the Clinical activity
component)*

Name of Candidate: _____

CLINICAL

Faculty Member's Self-Assessment of Clinical Contributions

Limiting your comments to one page, please describe your clinical contributions (broadly defined as in the SMD Regulations of the Faculty to include patient care or other professional services).

You may describe direct patient care, collaborative care (including consultations or team-based care), administration/leadership of clinical teams/sites/systems, practice improvement projects with demonstrable improvement, support or ancillary systems or services (e.g., medical informatics, public/community health), development and testing of assessment tools, or other activities as relevant to other types of professional service (e.g., clinical laboratory scientists, radiation physicists, sociologists, psychological assessments, or others including community engagement or efforts to foster equity, diversity, or inclusion).

Describe your area of clinical expertise and activity as defined by content area, populations served, approach, or methods. Describe the time/effort you spend on these activities.

Describe evidence for the quality of your clinical contributions, which may include: formal assessments from peers, patients, families, or others; quality or productivity metrics as applicable to your field; or regional, national, or international recognition for your expertise or achievements.

APPENDIX C-iv

Faculty Member's Self-Assessment of Research and/or Other Scholarly Contributions

*(Required for all senior academic promotions in the activity components of
Research, Scholarship, or Institutional Scholarship)*

Name of Candidate: _____

RESEARCH/SCHOLARSHIP/INSTITUTIONAL SCHOLARSHIP

Faculty Member's Self-Assessment of Research and/or Other Scholarly Contributions

A self-assessment of published work assists reviewers by providing the candidate's perceptions and by serving as a starting point for the reviewers' evaluations. Please select up to five (5) papers or other scholarly products; for each, summarize in two to three sentences the specific contribution each has made to the advancement of the field. The citations and the annotation for each should be single-spaced; the resultant self-assessment should be limited to one page.

Appendix D:

Templates for Chair's Letter to the Dean's Office Proposing Reappointment as Assistant Professor

- i. C-S-T (Clinical, Scholarship and Teaching)**
- ii. C-T (Clinical and Teaching)**
- iii. IS-CT (Institutional Scholarship and Clinical Teaching)**
- iv. IS-T (Institutional Scholarship and Teaching)**
- v. R-C-T (Research, Clinical and Teaching)**
- vi. R-T (Research and Teaching)**
- vii. S-T (Scholarship and Teaching)**

Template for Chair's Letter to the Dean's Office Proposing Reappointment as Assistant Professor (anticipated components: Clinical, Scholarship, and Teaching)

Dear Dr. Baumhauer,

I am writing to propose the reappointment of [faculty member's name] as Assistant Professor of [Department] based on [her/his] excellence in the anticipated components of Clinical, Scholarship, and Teaching, for a term of [two or three] years.

[summary of faculty member's background and training, and current roles in the Department, URM, regionally/nationally if appropriate]

[separate paragraphs describing excellence in each anticipated activity component — recognizing that, at the time of reappointment as Assistant Professor, their accomplishments in each area are typically still emerging and do not yet fully meet the criteria for promotion in rank — using language as follows]

Scholarship: [summarize evidence for (non-Research) scholarship “demonstrating a developed, in- depth approach of the highest quality to an area of focused interest,” as evidenced by [specific points from Regulations of the Faculty Appendix Ic]].

Clinical: [summarize evidence for “specialized professional services of the highest quality in patient care or other aspects of URM missions” as evidenced by [specific points from Regulations of the Faculty Appendix Ic]] It is most helpful to provide descriptions of the nature of the faculty member's expertise and professional services, including a general sense of how much time/effort they spend on their clinical practice. As applicable, it also is helpful to provide metrics or other relatively objective evidence regarding the quality, innovation, or impact of the faculty member's clinical activities.

Teaching: [summarize evidence for “excellence in teaching contributions,” broadly defined, as evidenced by [specific points from Regulations of the Faculty Appendix Ic]] It is helpful to provide descriptions of the faculty member's primary educational responsibilities, including a general sense of how much time/effort they spend on these. As applicable, it also is helpful to provide metrics or other relatively objective evidence regarding the quality, innovation, influence, or impact of the faculty member's educational activities.

Service, Leadership, & National Recognition: [summarize evidence for the faculty member “using her/his expertise and skills in any of the above components to the benefit of their department, the SMD, the University, and/or their field or discipline,” which may include leadership at local, regional, national, or international levels depending on career path, as evidenced by [specific points from Regulations of the Faculty Appendix Ic]]

[Please note that the faculty member's professional efforts working with the community, or fostering an inclusive and welcoming environment, should be described as applicable to their activity components and/or as part of their service or leadership to the institution or field]

In recommending this faculty member for academic reappointment, *[this faculty member has consistently demonstrated behaviors in keeping with our professionalism values, standards, and expectations] or [any significant professionalism concerns have been remediated to a degree sufficient to make this recommendation].*

[Also please note that quotations from referee letters either should not be used, or should be used in de-identified form, because the faculty member will receive a copy of this letter after it is finalized.]

[Close with summary paragraph, restating the proposed reappointment, anticipated components, and term]

[chair signature]

I concur with the above reappointment based on excellence in the anticipated components of Clinical, Scholarship, and Teaching, effective *[effective date]* through *[end date]*

David C. Linehan, MD
CEO, University of Rochester Medical Center
Dean, School of Medicine and Dentistry
Senior Vice President for Health Sciences

Alternate language for faculty with expiring work authorization:

I concur with the above reappointment based on excellence in the anticipated components Clinical, Scholarship, and Teaching, effective *[effective date]* through *[work authorization end date]*. Upon renewal of work authorization, this appointment will be extended to the full complement of the reappointment period.

Template for Chair's Letter to the Dean's Office Proposing Reappointment as Assistant Professor (anticipated components: Clinical and Teaching)

Dear Dr. Baumhauer,

I am writing to propose the reappointment of [faculty member's name] as Assistant Professor of [Department] based on [her/his] excellence in the anticipated components of Clinical and Teaching, for a term of [two or three] years.

[summary of faculty member's background and training, and current roles in the Department, URM, regionally/nationally if appropriate]

[separate paragraphs describing excellence in each anticipated activity component — recognizing that, at the time of reappointment as Assistant Professor, their accomplishments in each area are typically still emerging and do not yet fully meet the criteria for promotion in rank — using language as follows]

Clinical: [summarize evidence for “specialized professional services of the highest quality in patient care or other aspects of URM missions” as evidenced by [specific points from Regulations of the Faculty Appendix Ic]] It is most helpful to provide descriptions of the nature of the faculty member's expertise and professional services, including a general sense of how much time/effort they spend on their clinical practice. As applicable, it also is helpful to provide metrics or other relatively objective evidence regarding the quality, innovation, or impact of the faculty member's clinical activities.

Contributions to Academic Missions (for faculty whose sole component is Clinical along with Teaching): [summarize evidence for “active support of URM academic missions,” as evidenced by [specific points from Regulations of the Faculty Appendix Ic]]

Teaching: [summarize evidence for “excellence in teaching contributions,” broadly defined, as evidenced by [specific points from Regulations of the Faculty Appendix Ic]] It is helpful to provide descriptions of the faculty member's primary educational responsibilities, including a general sense of how much time/effort they spend on these. As applicable, it also is helpful to provide metrics or other relatively objective evidence regarding the quality, innovation, influence, or impact of the faculty member's educational activities.

Service, Leadership, & National Recognition: [summarize evidence for the faculty member “using her/his expertise and skills in any of the above components to the benefit of their department, the SMD, the University, and/or their field or discipline,” which may include leadership at local, regional, national, or international levels depending on career path, as evidenced by [specific points from Regulations of the Faculty Appendix Ic]]

[Please note that the faculty member's professional efforts working with the community, or fostering an inclusive and welcoming environment, should be described as applicable to their activity components and/or as part of their service or leadership to the institution or field]

In recommending this faculty member for academic reappointment, *[this faculty member has consistently demonstrated behaviors in keeping with our professionalism values, standards, and expectations] or [any significant professionalism concerns have been remediated to a degree sufficient to make this recommendation].*

[Also please note that quotations from referee letters either should not be used, or should be used in de-identified form, because the faculty member will receive a copy of this letter after it is finalized.]

[Close with summary paragraph, restating the proposed reappointment, anticipated components, and term]

[chair signature]

I concur with the above reappointment based on excellence in the anticipated components of Clinical and Teaching, effective *[effective date]* through *[end date]*

David C. Linehan, MD
CEO, University of Rochester Medical Center
Dean, School of Medicine and Dentistry
Senior Vice President for Health Sciences

Alternate language for faculty with expiring work authorization:

I concur with the above reappointment based on excellence in the anticipated components Clinical and Teaching, effective *[effective date]* through *[work authorization end date]*. Upon renewal of work authorization, this appointment will be extended to the full complement of the reappointment period.

Template for Chair's Letter to the Dean's Office Proposing Reappointment as Assistant Professor (anticipated components: Institutional Scholarship, Clinical, and Teaching)

Dear Dr. Baumhauer,

I am writing to propose the reappointment of [faculty member's name] as Assistant Professor of [Department] based on [her/his] excellence in the anticipated components of Institutional Scholarship, Clinical, and Teaching, for a term of [two or three] years.

[summary of faculty member's background and training, and current roles in the Department, URM, regionally/nationally if appropriate]

[separate paragraphs describing excellence in each anticipated activity component — recognizing that, at the time of reappointment as Assistant Professor, their accomplishments in each area are typically still emerging and do not yet fully meet the criteria for promotion in rank — using language as follows]

Institutional Scholarship: [summarize evidence for “distinctive institution-wide scientific or scholarly contributions that have a significant impact on the core missions of the SMD,” as evidenced by [specific points from Regulations of the Faculty Appendix Ic]].

Clinical: [summarize evidence for “specialized professional services of the highest quality in patient care or other aspects of URM missions” as evidenced by [specific points from Regulations of the Faculty Appendix Ic]] It is most helpful to provide descriptions of the nature of the faculty member's expertise and professional services, including a general sense of how much time/effort they spend on their clinical practice. As applicable, it also is helpful to provide metrics or other relatively objective evidence regarding the quality, innovation, or impact of the faculty member's clinical activities.

Teaching: [summarize evidence for “excellence in teaching contributions,” broadly defined, as evidenced by [specific points from Regulations of the Faculty Appendix Ic]] It is helpful to provide descriptions of the faculty member's primary educational responsibilities, including a general sense of how much time/effort they spend on these. As applicable, it also is helpful to provide metrics or other relatively objective evidence regarding the quality, innovation, influence, or impact of the faculty member's educational activities.

Service, Leadership, & National Recognition: [summarize evidence for the faculty member “using her/his expertise and skills in any of the above components to the benefit of their department, the SMD, the University, and/or their field or discipline,” which may include leadership at local, regional, national, or international levels depending on career path, as evidenced by [specific points from Regulations of the Faculty Appendix Ic]]

[Please note that the faculty member's professional efforts working with the community, or fostering an inclusive and welcoming environment, should be described as applicable to their activity components and/or as part of their service or leadership to the institution or field]

In recommending this faculty member for academic reappointment, *[this faculty member has consistently demonstrated behaviors in keeping with our professionalism values, standards, and expectations] or [any significant professionalism concerns have been remediated to a degree sufficient to make this recommendation].*

[Also please note that quotations from referee letters either should not be used, or should be used in de-identified form, because the faculty member will receive a copy of this letter after it is finalized.]

[Close with summary paragraph, restating the proposed reappointment, anticipated components, and term]

[chair signature]

I concur with the above reappointment based on excellence in the anticipated components of Institutional Scholarship, Clinical, and Teaching, effective *[effective date]* through *[end date]*.

David C. Linehan, MD
CEO, University of Rochester Medical Center
Dean, School of Medicine and Dentistry
Senior Vice President for Health Sciences

Alternate language for faculty with expiring work authorization:

I concur with the above reappointment based on excellence in the anticipated components of Institutional Scholarship, Clinical, and Teaching, effective *[effective date]* through *[work authorization end date]*. Upon renewal of work authorization, this appointment will be extended to the full complement of the reappointment period.

Template for Chair's Letter to the Dean's Office Proposing Reappointment as Assistant Professor (anticipated components: Institutional Scholarship and Teaching)

Dear Dr. Baumhauer,

I am writing to propose the reappointment of [faculty member's name] as Assistant Professor of [Department] based on [her/his] excellence in the anticipated components of Institutional Scholarship and Teaching, for a term of [two or three] years.

[summary of faculty member's background and training, and current roles in the Department, URM, regionally/nationally if appropriate]

[separate paragraphs describing excellence in each anticipated activity component — recognizing that, at the time of reappointment as Assistant Professor, their accomplishments in each area are typically still emerging and do not yet fully meet the criteria for promotion in rank — using language as follows]

Institutional Scholarship: [summarize evidence for “distinctive institution-wide scientific or scholarly contributions that have a significant impact on the core missions of the SMD,” as evidenced by [specific points from Regulations of the Faculty Appendix Ic]].

Teaching: [summarize evidence for “excellence in teaching contributions,” broadly defined, as evidenced by [specific points from Regulations of the Faculty Appendix Ic]] It is helpful to provide descriptions of the faculty member's primary educational responsibilities, including a general sense of how much time/effort they spend on these. As applicable, it also is helpful to provide metrics or other relatively objective evidence regarding the quality, innovation, influence, or impact of the faculty member's educational activities.

Service, Leadership, & National Recognition: [summarize evidence for the faculty member “using her/his expertise and skills in any of the above components to the benefit of their department, the SMD, the University, and/or their field or discipline,” which may include leadership at local, regional, national, or international levels depending on career path, as evidenced by [specific points from Regulations of the Faculty Appendix Ic]]

[Please note that the faculty member's professional efforts working with the community, or fostering an inclusive and welcoming environment, should be described as applicable to their activity components and/or as part of their service or leadership to the institution or field]

In recommending this faculty member for academic reappointment, *[this faculty member has consistently demonstrated behaviors in keeping with our professionalism values, standards, and expectations] or [any significant professionalism concerns have been remediated to a degree sufficient to make this recommendation].*

[Also please note that quotations from referee letters either should not be used, or should be used in de-identified form, because the faculty member will receive a copy of this letter after it is finalized.]

[Close with summary paragraph, restating the proposed reappointment, anticipated components, and term]

[chair signature]

I concur with the above reappointment based on excellence in the anticipated components of Institutional Scholarship and Teaching, effective [effective date] through [end date]

David C. Linehan, MD
CEO, University of Rochester Medical Center
Dean, School of Medicine and Dentistry
Senior Vice President for Health Sciences

Alternate language for faculty with expiring work authorization:

I concur with the above reappointment based on excellence in the anticipated components of Institutional Scholarship and Teaching, effective *[effective date]* through *[work authorization end date]*. Upon renewal of work authorization, this appointment will be extended to the full complement of the reappointment period.

Template for Chair's Letter to the Dean's Office Proposing Reappointment as Assistant Professor (anticipated components: Research, Clinical, and Teaching)

Dear Dr. Baumhauer,

I am writing to propose the reappointment of [faculty member's name] as Assistant Professor of [Department] based on [her/his] excellence in the anticipated components of Research, Clinical, and Teaching, for a term of [two or three] years.

[summary of faculty member's background and training, and current roles in the Department, URM, regionally/nationally if appropriate]

[separate paragraphs describing excellence in each anticipated activity component — recognizing that, at the time of reappointment as Assistant Professor, their accomplishments in each area are typically still emerging and do not yet fully meet the criteria for promotion in rank — using language as follows]

Research: [summarize evidence for “intellectually independent research in an identifiable area of scientific expertise,” as evidenced by [specific points from Regulations of the Faculty Appendix Ic]]. *If the faculty member's contributions are largely as part of a team* (and thus largely as middle author or roles on grants other than PI), comment explicitly on the evidence (from referee letters, disciplinary background, etc.) that the faculty member is the intellectual steward of a defined portion of the work.

Clinical: [summarize evidence for “specialized professional services of the highest quality in patient care or other aspects of URM missions” as evidenced by [specific points from Regulations of the Faculty Appendix Ic]] It is most helpful to provide descriptions of the nature of the faculty member's expertise and professional services, including a general sense of how much time/effort they spend on their clinical practice. As applicable, it also is helpful to provide metrics or other relatively objective evidence regarding the quality, innovation, or impact of the faculty member's clinical activities.

Teaching: [summarize evidence for “excellence in teaching contributions,” broadly defined, as evidenced by [specific points from Regulations of the Faculty Appendix Ic]] It is helpful to provide descriptions of the faculty member's primary educational responsibilities, including a general sense of how much time/effort they spend on these. As applicable, it also is helpful to provide metrics or other relatively objective evidence regarding the quality, innovation, influence, or impact of the faculty member's educational activities.

Service, Leadership, & National Recognition: [summarize evidence for the faculty member “using her/his expertise and skills in any of the above components to the benefit of their department, the SMD, the University, and/or their field or discipline,” which may include leadership at local, regional, national, or international levels depending on career path, as evidenced by [specific points from Regulations of the Faculty Appendix Ic]]

[Please note that the faculty member's professional efforts working with the community, or fostering an inclusive and welcoming environment, should be described as applicable to their activity components and/or as part of their service or leadership to the institution or field]

In recommending this faculty member for academic reappointment, *[this faculty member has consistently demonstrated behaviors in keeping with our professionalism values, standards, and expectations] or [any significant professionalism concerns have been remediated to a degree sufficient to make this recommendation].*

[Also please note that quotations from referee letters either should not be used, or should be used in de-identified form, because the faculty member will receive a copy of this letter after it is finalized.]

[Close with summary paragraph, restating the proposed reappointment, anticipated components, and term]

[chair signature]

I concur with the above reappointment based on excellence in the anticipated components of Research, Clinical, and Teaching, effective *[effective date]* through *[end date]*

David C. Linehan, MD
CEO, University of Rochester Medical Center
Dean, School of Medicine and Dentistry
Senior Vice President for Health Sciences

Alternate language for faculty with expiring work authorization:

I concur with the above reappointment based on excellence in the anticipated components of Research, Clinical, and Teaching, effective *[effective date]* through *[work authorization end date]*. Upon renewal of work authorization, this appointment will be extended to the full complement of the reappointment period.

Template for Chair's Letter to the Dean's Office Proposing Reappointment as Assistant Professor (anticipated components: Research and Teaching)

Dear Dr. Baumhauer,

I am writing to propose the reappointment of [faculty member's name] as Assistant Professor of [Department] based on [her/his] excellence in the anticipated components of Research and Teaching, for a term of [two or three] years.

[summary of faculty member's background and training, and current roles in the Department, URMC, regionally/nationally if appropriate]

[separate paragraphs describing excellence in each anticipated activity component — recognizing that, at the time of reappointment as Assistant Professor, their accomplishments in each area are typically still emerging and do not yet fully meet the criteria for promotion in rank — using language as follows]

Research: [summarize evidence for “intellectually independent research in an identifiable area of scientific expertise,” as evidenced by [specific points from Regulations of the Faculty Appendix Ic]]. *If the faculty member's contributions are largely as part of a team* (and thus largely as middle author or roles on grants other than PI), comment explicitly on the evidence (from referee letters, disciplinary background, etc.) that the faculty member is the intellectual steward of a defined portion of the work.

Teaching: [summarize evidence for “excellence in teaching contributions,” broadly defined, as evidenced by [specific points from Regulations of the Faculty Appendix Ic]] It is helpful to provide descriptions of the faculty member's primary educational responsibilities, including a general sense of how much time/effort they spend on these. As applicable, it also is helpful to provide metrics or other relatively objective evidence regarding the quality, innovation, influence, or impact of the faculty member's educational activities.

Service, Leadership, & National Recognition: [summarize evidence for the faculty member “using his/her expertise and skills in any of the above components to the benefit of their department, the SMD, the University, and/or their field or discipline,” which may include leadership at local, regional, national, or international levels depending on career path, as evidenced by [specific points from Regulations of the Faculty Appendix Ic]]

[Please note that the faculty member's professional efforts working with the community, or fostering an inclusive and welcoming environment, should be described as applicable to their activity components and/or as part of their service or leadership to the institution or field]

In recommending this faculty member for academic reappointment, *[this faculty member has consistently demonstrated behaviors in keeping with our professionalism values, standards, and expectations] or [any significant professionalism concerns have been remediated to a degree sufficient to make this recommendation].*

[Also please note that quotations from referee letters either should not be used, or should be used in de-identified form, because the faculty member will receive a copy of this letter after it is finalized.]

[Close with summary paragraph, restating the proposed reappointment, anticipated components, and term]

[chair signature]

I concur with the above reappointment based on excellence in the anticipated components of Research and Teaching, effective *[effective date]* through *[end date]*

David C. Linehan, MD
CEO, University of Rochester Medical Center
Dean, School of Medicine and Dentistry
Senior Vice President for Health Sciences

Alternate language for faculty with expiring work authorization:

I concur with the above reappointment based on excellence in the anticipated components of Research and Teaching, effective *[effective date]* through *[work authorization end date]*. Upon renewal of work authorization, this appointment will be extended to the full complement of the reappointment period.

Template for Chair's Letter to the Dean's Office Proposing Reappointment as Assistant Professor (anticipated components: Scholarship and Teaching)

Dear Dr. Baumhauer,

I am writing to propose the reappointment of [faculty member's name] as Assistant Professor of [Department] based on [her/his] excellence in the anticipated components of Scholarship and Teaching, for a term of [two or three] years.

[summary of faculty member's background and training, and current roles in the Department, URM, regionally/nationally if appropriate]

[separate paragraphs describing excellence in each anticipated activity component — recognizing that, at the time of reappointment as Assistant Professor, their accomplishments in each area are typically still emerging and do not yet fully meet the criteria for promotion in rank — using language as follows]

Scholarship: [summarize evidence for (non-Research) scholarship “demonstrating a developed, in-depth approach of the highest quality to an area of focused interest,” as evidenced by [specific points from Regulations of the Faculty Appendix Ic]].

Teaching: [summarize evidence for “excellence in teaching contributions,” broadly defined, as evidenced by [specific points from Regulations of the Faculty Appendix Ic]] It is helpful to provide descriptions of the faculty member's primary educational responsibilities, including a general sense of how much time/effort they spend on these. As applicable, it also is helpful to provide metrics or other relatively objective evidence regarding the quality, innovation, influence, or impact of the faculty member's educational activities.

Service, Leadership, & National Recognition: [summarize evidence for the faculty member “using her/his expertise and skills in any of the above components to the benefit of their department, the SMD, the University, and/or their field or discipline,” which may include leadership at local, regional, national, or international levels depending on career path, as evidenced by [specific points from Regulations of the Faculty Appendix Ic]]

[Please note that the faculty member's professional efforts working with the community, or fostering an inclusive and welcoming environment, should be described as applicable to their activity components and/or as part of their service or leadership to the institution or field]

In recommending this faculty member for academic reappointment, *[this faculty member has consistently demonstrated behaviors in keeping with our professionalism values, standards, and expectations]* or *[any significant professionalism concerns have been remediated to a degree sufficient to make this recommendation]*.

[Also please note that quotations from referee letters either should not be used, or should be used in de-identified form, because the faculty member will receive a copy of this letter after it is finalized.]

[Close with summary paragraph, restating the proposed reappointment, anticipated components, and term]

[chair signature]

I concur with the above reappointment based on excellence in the anticipated components of Scholarship and Teaching, effective *[effective date]* through *[end date]*

David C. Linehan, MD
CEO, University of Rochester Medical Center
Dean, School of Medicine and Dentistry
Senior Vice President for Health Sciences

Alternate language for faculty with expiring work authorization:

I concur with the above reappointment based on excellence in the anticipated components of Scholarship and Teaching, effective *[effective date]* through *[work authorization end date]*. Upon renewal of work authorization, this appointment will be extended to the full complement of the reappointment period.

UNIVERSITY OF ROCHESTER SCHOOL OF MEDICINE AND DENTISTRY

A “FAST TRACK” PROCESS FOR PRELIMINARY REVIEW OF PROPOSED NEW SENIOR FACULTY APPOINTMENTS OR PROMOTIONS

A. JUSTIFICATION:

- When recruiting candidates for senior faculty appointments (i.e., associate professor and professor) in either basic or clinical sciences, the pool of viable candidates is frequently small, recruitment processes and negotiations may be protracted and, once a candidate accepts the offer, timelines for meeting a mutually desirable appointment start date are frequently short.
- Because of the above, an initial appointment as “Interim Professor” has often been used as a mechanism to allow the faculty member to be placed on the University of Rochester payroll and begin working, while awaiting the assembly and final review of all required appointment materials by the *ad hoc* and Steering Committees.
- Frequent use of such a mechanism creates problems –among them:
 - ❖ It anticipates and presumes endorsement by the *ad hoc* and Steering Committees of a permanent appointment as stipulated in the offer letter.
 - ❖ It has the potential for creating significant conflicts within these committees. Steering Committee members often feel conflicted, as they try to make objective judgments and recommendations free of bias.

The process outlined on the following page is designed to minimize these conflicts. The proposed approach takes advantage of the Office of Academic Affairs’ accumulated experience and expertise in offering to department chairs and center directors an informal assessment of the candidate’s academic credentials for the proposed rank/components prior to the completion of the recruitment process. The goal is to increase the likelihood that provisions in the final offer letter with respect to rank and components will be more consistent with what the ultimate recommendation of the *ad hoc* and Steering Committees might be.

B PROCEDURE:

- 1) Before an offer letter for a senior faculty appointment (i.e., associate professor or professor) in any of the academic components (Research, Scholarship Institutional Scholarship, Clinical, plus Teaching) is finalized, and optionally before an internal promotion is proposed, the department chair and/or center director will submit to the Academic Affairs office (i.e., Vice Dean for Academic Affairs (SADAA)) the following:
 - (a) A brief memo summarizing: (i) key elements in the candidate's current position, research interests, special expertise and academic/professional contributions; (ii) the candidate's proposed role in the department and medical center with emphasis on the importance of the recruitment/promotion in meeting major programmatic, clinical, and/or research needs; (iii) the candidate's proposed rank, activity components and (when applicable) anticipated administrative leadership role.
 - (b) An up-to-date copy of the candidate's CV.
 - (c) Three to four internal and/or external letters of recommendation.
Note: This requirement should be easily met. For the former, internal memos to the chair from individuals who may know or who have interviewed the candidate during visits are an appropriate substitute. For the latter, the department should already have on hand the customary number of letters of recommendation in conjunction with the candidate's initial application.
- 2) Upon receipt, the SADAA will review the above material and then either: (i) make a recommendation, within one week, with respect to the proposed rank and activity components or any other issue that may need to be addressed by the department prior to constructing the final offer letter or chair's letter of recommendation; or (ii) ask one or two members of the Steering Committee (SC) to review the material and make a recommendation to the SADAA within one week. The SADAA will transmit the above (anonymized) recommendation to the department chair/center director. This recommendation may be made via CONFIDENTIAL e-mail and, if the chair agrees, he/she will incorporate the SADAA's recommendation in the offer letter or his/her letter of recommendation for the promotion.
- 3) Once the candidate accepts the offer, in writing, the department will promptly initiate the process to assemble the full complement of materials for the normal appointment or promotion process. When the complete dossier is received in the Academic Affairs' office, the SADAA will appoint the customary 3-member *ad hoc* committee, chaired by the SC member who served in the fast-track process.

SMD Faculty Ranks and Job Profile

Appendix F

Faculty Rank/Functional Title	Job Profile	HR Descriptor ¹	SMD Appt Type ²
Professor	UR0001	Professor: TE, T, R, S	Academic Appointments
Associate Professor	UR0003	Assoc Prof: TE, T, R, S	
Assistant Professor	UR0005	Asst Prof: TE, T, R, S	
Senior Instructor	UR0007	Sr Instruct: T, R, S	
Instructor	UR0009	Instruct, T, R, S	

Faculty Rank/Functional Title	Job Profile	HR Descriptor ¹	SMD Appt Type ²
Professor of Clinical	UR0046	Professor: T, S, Sp	Professional Appointments
Associate Professor of Clinical	UR0048	Assoc Prof: T, S, Sp	
Assistant Professor of Clinical	UR0060	Asst Prof: T, S, Sp	
Senior Instructor of Clinical	UR0072	Sr Instruct: T, S, Sp	
Instructor of Clinical	UR0080	Instruct: T, S, Sp	
Senior Associate	UR0073	Sr Assoc Prof: T, S, Sp, Qual	
Associate	UR0143	Assoc Prof: T, S, Sp, Qual	
Assistant	UR0144	Asst Prof: T, S, Sp, Qual	
Associate Professor (Service)	UR0111	Assoc Prof: T, S	
Assistant Professor (Service)	UR0110	Asst Prof: T, S	
Senior Instructor (Service)	UR0010	Sr Instruct: T, S	
Instructor (Service)	UR0044	Instruct: T, S	

Faculty Rank/Functional Title	Job Profile	HR Descriptor ¹	SMD Appt Type ²
Research Professor	UR0038	Professor: R, S	Research Appointments
Research Associate Professor	UR0040	Assoc Prof: R, S	
Research Assistant Professor	UR0042	Asst Prof: R, S	

Faculty Rank/Functional Title	Job Profile	HR Descriptor ¹	SMD Appt Type ²
Clinical Professor	UR0027	Professor: T, Sp	Voluntary Appointments
Clinical Associate Professor	UR0029	Assoc Prof: T, Sp	
Clinical Assistant Professor	UR0031	Asst Prof: T, Sp	
Clinical Senior Instructor	UR0033	Sr Instruct: T, Sp	
Clinical Instructor	UR0035	Instruct: T, Sp	
Clinical Senior Associate	UR0036	Clin Sr Assoc: T, Sp, Qual	
Clinical Associate	UR0150	Clinical Assoc: T, Sp, Qual	
Clinical Assistant	UR0145	ClinicalAsst: T, Sp, Qual	

SMD Faculty Ranks and Job Profile

Faculty Rank/Functional Title	Job Profile	HR Descriptor ¹	SMD Appt Type ²
Adjunct Professor	UR0037	Professor: T	Adjunct appointments
Adjunct Associate Professor	UR0039	Assoc Prof: T	
Adjunct Assistant Professor	UR0041	Asst Prof: T	
Adjunct Senior Instructor	UR0043	Sr Instruct: T	
Adjunct Instructor	UR0045	Instruct: T	

Faculty Rank/Functional Title	Job Profile	HR Descriptor ¹	SMD Appt Type ²
Visiting Professor	UR0047	Professor: T, R	Visiting/ Temporary Appointments
Visiting Associate Professor	UR0049	Assoc Prof: T, R	
Visiting Assistant Professor	UR0057	Asst Prof: T, R	
Visiting Senior Instructor	UR0059	Sr Instruct: T, R	
Visiting Instructor	UR0061	Instruct: T, R	

Faculty Rank/Functional Title	Job Profile	HR Descriptor ¹	Appt Type ²
Chief, Interim Division Chief	URO142	Chief	Administrative
Assistant Chair	UR0112	Asst Chair	
Chair, Vice Chair	UR0119	Chair	
Assistant Director	UR0114	Asst Director	
Director, Co-Director	UR0138	Director	
Assistant Dean	UR0113	Asst Dean	
Associate Dean	UR0117	Assoc Dean	
Senior Associate Dean	UR0140	Senior Associate Dean	
Dean, Vice Dean	UR0137	Dean	
Assistant Vice Provost	UR0116	Asst Vice Provost	
Associate Vice Provost	UR0118	Assoc Vice Provost	
Vice Provost	UR0141	Vice Provost	
Provost	UR0139	Provost	

Faculty Rank/Functional Title	Job Profile	HR Descriptor ¹	Appt Type ²
Professor Emeritus NO PAY, or Clinical Professor Emeritus NO PAY (not to be used for any other voluntary faculty type)	UR0115	Professor Emeritus	Post retirement
For academic faculty			
Professor (part-time)	UR0124	Professor: T, R, S	
Associate Professor (part-time)	UR0125	Associate Professor: T, R, S	

¹HR Descriptors are for HR reporting purposes and do not reflect SMD academic components or faculty responsibilities

²SMD Appointment Type definitions can be found in the SMD Regulations of the Faculty or in the SMD Required Paperwork

APPENDIX G- URSMD ACADEMIC AFFAIRS – Faculty Demographics Form

For Departmental Completion only

Faculty Member Name:

Department:

Appointment (Start) Date:

For faculty member completion, a response is required to all questions not marked optional

Date of Birth:

Did you apply via URFacultySearch?

Yes no

Place of Birth:

Comment*:

**optional*

What is your gender? (Select allthat apply)

Man

Non-Binary

Woman

Prefer to self-describe

Are you Hispanic or Latino?

Yes

No

Prefer not to Provide

What is your race? (select one or more)

American Indian or Alaska Native

Asian

Black or African American

Native Hawaiian or Pacific Islander

White

Prefer not to Provide

Prefer not to Provide

APPENDIX H

UR SMD CV TEMPLATE

Appendix II (revised May 2021)

[Bracketed italicized text is provided for guidance — please delete from your CV and replace with your information. Also, please delete category headings that are not applicable.]

[name, degree] | [month, year CV updated] p. X

UNIVERSITY OF ROCHESTER SCHOOL OF MEDICINE & DENTISTRY CURRICULUM VITAE

[Name, Degree]

[full mailing address]

Telephone: | Fax:

E-Mail:

[optional] **Date of Birth:**

[optional] **Citizenship:**

[optional] **Pronouns:**

CURRENT POSITIONS

[list here only what you want visible at first glance; all listed in this section will be repeated in various sections below]

[current academic appointment / department]

[any other major leadership / administrative title/role]

University of Rochester School of Medicine & Dentistry, Rochester, NY

EDUCATION

[years] [degree, institution, location]

POST-DEGREE TRAINING

[include residency, fellowship, postdoc training, or certificate programs or other major non-degree-granting educational programs taken; do not list all continuing education activities taken]

[for each, list:]

[years] [type of training/field, institution, location]

PROFESSIONAL LICENSURE & CERTIFICATIONS

[years] [type of license, licensing state or agency]

[years] [specialty board/field, indicate if initial certification or maintenance of certification]

FACULTY APPOINTMENTS

[years] [rank/title, department, institution, location]

HOSPITAL & ADMINISTRATIVE APPOINTMENTS

[years] [role/title, department if relevant, institution/organization, location]

PROFESSIONAL NON-ACADEMIC EMPLOYMENT HISTORY

[years] [role/title]

HONORS AND AWARDS

[year] [name of honor/award, institution or organization]

ACADEMIC & PROFESSIONAL ORGANIZATIONS

SMD Faculty Ranks and Job Profile
[if helpful, consider using subheadings for local/regional vs national/international]

[years] [organization in which you are a member]

[year] [any appointed/elected role beyond membership, e.g., elected as a fellow, board of directors or officer role]

COMMITTEES & OTHER ADMINISTRATIVE SERVICE

[may use subheadings, e.g., UR Department of {primary department}, UR Extra-Departmental, Local/Regional, National, International]

[under each subheading, list as follows:]

[years] [role, name of committee or assignment, specify if departmental, school or other organizational unit if not already clear from title and subheading]

PROFESSIONAL SERVICE ASSIGNMENTS

[only include those not covered by categories above]

EDUCATIONAL CONTRIBUTIONS

[Subheading for type of learner; use subheadings such as undergraduate, graduate student, medical student, resident, postdoctoral fellow, junior faculty, continuing education {including local/regional presentations} — may further subdivide into UR vs regional, national, international if relevant]

[under each subheading, list as follows:]

[years] [role/title {making clear if role involves teaching, assessment, curriculum development, mentoring/advising, or leadership/administration}, context/educational program, terse description of what the role involves {if needed}, terse description of how much time involved {if relevant, e.g., “0.20 FTE,” “4 hours/week x 8 weeks/year”} or mentoring role {e.g., may use * to denote primary mentee if applicable}]

COMMUNITY ACTIVITIES

[may include local, regional, national, or international community engagement or service]

[years] [role, organization, other description if needed]

VISITING PROFESSORSHIPS & NAMED LECTURESHIPS

[dates] [title/role, institution, location]

EXTERNAL ADVISORY / HEALTH COUNCILS & RESEARCH REVIEW COMMITTEES

[dates] [role, organization/agency, location]

CONSULTATIONS

[dates] [role, agency/institution/organization, location]

EDITORIAL ASSIGNMENTS IN PROFESSIONAL JOURNALS

***Ad hoc* reviews for:**

[list journals]

Editorial Assignments

[may use subheadings to denote Editorial Board vs Editor & Associate Editor roles if desired]

[dates] [title/role, journal]

PATENTS & INVENTIONS

[inventors, invention, country, patent number, granted date]

GRANTS & CONTRACTS

As Principal Investigator / Co-Principal Investigator

[for each, list P.I.s and Co-P.I.s, % effort supported, mechanism/type of funding, project name/title,

SMD Faculty Ranks and Job Profile

funding agency, dates, total costs, and terse description of project or your role if needed]

Other Roles

[for each, list P.I.s and Co-P.I.s, your role, % effort supported, mechanism/type of funding, project name/title, funding agency, dates, total costs, and terse description of project or your role if needed]

UNFUNDED / OTHER RESEARCH PROJECTS

[for each significant project, list dates, role, % effort supported {if applicable}, project name/title, source of support {if applicable}, terse description of project]

PRESENTATIONS

** denotes trainee / supervisee*

[conferences refer to work submitted for presentation]

Local, Regional, & State Conferences

[date] [authors, title, type of presentation {if applicable, e.g., poster, symposium}, meeting/organization name, location]

National & International Conferences

[date] [authors, title, type of presentation {if applicable, e.g., poster, symposium}, meeting/organization name, location]

Invited Presentations: Local, Regional, & State

[date] [title, meeting/organization/institution name, location]

Invited Presentations: National & International

[date] [title, meeting/organization/institution name, location]

PUBLICATIONS

** denotes trainee / supervisee*

[may include 'Published Abstracts' section if desired, but for most, this will be 'covered' above under presentations at meetings]

Peer-Reviewed Journal Articles

[numbered list with authors, title, journal, volume, pages, year]

Books, Monographs, Chapters, & Reviews

[numbered list with authors, title, journal or book title, volume, pages, year]

Letters, Editorials, & Other Publications

[numbered list with authors, title, journal/venue, volume, pages, year]

Other Media

[i.e., any non-print media / enduring materials including webinars]

[numbered list with authors, title, type of media, issue/volume/pages {if applicable}, publisher {if applicable}, date] [include brief metrics if helpful to demonstrate reach/impact]

Appendix I

Chair

Attestation

**Primary Reappointment
Chair attestation Document for Reappointment of
Associate Professor and Professor***

Name:

Reappointment Term:

Please Check All Boxes:

- ☐ A formal assessment including feedback of the faculty member's annual review (completed either electronically in MyPath or by paper submission) and current CV was performed.
- ☐ A discussion regarding the faculty member's current rank, academic interests and future goals was performed.
- ☐ Future promotion opportunities, criteria, timeline and components (teaching, clinical care, research, scholarship, leadership and institutional scholarship and service) a highlighted by the faculty member's s area of interest were discussed.
- ☐ The teaching evaluations of the faculty member and/or contributions to the educational program were discussed.
- ☐ In recommending this faculty member for reappointment, one of the following statements is true: a) this faculty member has consistently demonstrated behaviors in keeping with our Professionalism values, standards and expectations; or b) any significant professionalism concerns have been remediated to a degree sufficient to make this recommendation.

If Applicable:

- ☐ If Research Associate Professor or Research Professor: Funding source(s) for salary for the entire appointment period:

Faculty Signature

Print Faculty Name

Chair Signature

Print Name

Department:

Date:

**applicable faculty titles: Professor, Professor of Clinical, Research Professor, Clinical Professor, Associate Professor, Associate Professor of Clinical, Research Associate Professor, Clinical Associate Professor*

Appendix J

Joint Chair

Attestation

CHAIR/CENTER DIRECTOR ATTESTATION FOR JOINT REAPPOINTMENTS

Faculty Member Name	<input type="text"/>
Primary Department/Center	<input type="text"/>
Reappointing Department/Center	<input type="text"/>
Faculty Rank	<input type="text" value="Please Select Faculty Rank"/>
Term of secondary reappointment	<input type="text"/> to <input type="text"/>
Term of primary appointment	<input type="text"/> to <input type="text"/>

Secondary department please check all boxes:

☐ In recommending this faculty member for reappointment this faculty member has consistently demonstrated behaviors in keeping with our Professionalism values, standards and expectations.

☐ This faculty member remains in good standing and is an active participant in the Department/Center of

	<input type="text"/>	<input type="text"/>
Chair Signature	Center Director	Joint Chair/Center Director Signature
<input type="text"/>	<input type="text"/>	<input type="text"/>
Print Chair Name	Print Center Director Name	Print Joint Chair/Center Director Name

Primary School
Dean's Office Signature

Secondary School
Dean's Office Signature

Appendix K

Faculty Departure Form



SMD Faculty Ranks and Job Profile

SMD Faculty Departure Form

For completion by departing faculty
Submit completed form to primary department chair
Department upload to Academic Affairs as soon as completed

Name (Printed)/degree	
Primary Department/Division	
Faculty Title (i.e., Professor, Associate Professor, etc.)	
Last day of work	
Reason for leaving UR School of Medicine & Dentistry	<div><input type="checkbox"/> Retirement</div> <div><input type="checkbox"/> Appointment ended</div> <div><input type="checkbox"/> Leaving for position elsewhere</div> <div><input type="checkbox"/> Deceased (Attach obituary or announcement)</div> <div><input type="checkbox"/> Other: _____</div>
If leaving for position elsewhere, please provide your forwarding contact information.	<div>Employer Name: _____</div> <div>Email: _____</div> <div>Mailing Address: _____</div>
I acknowledge that my faculty position at the UR School of Medicine and Dentistry will end effective on the date indicated above.	
Faculty signature _____ Date _____	

EXIT Interview Opportunity

We are offering a voluntary **confidential exit interview** to all interested faculty members departing SMD.
Please choose from **one of the options** below:

___ Yes, I would like to participate in an IN-PERSON 1:1 interview.
Interviews will take approximately **30-45 minutes**.

Provide an email address for the Office of Wellbeing or the Office of Academic Affairs to contact you:

_____.

OR

___ Yes, I would like to participate in an ONLINE EXITSURVEY
Link to RedCap Survey [here](#)

___ I do not wish to participate in an exit interview or on-line survey.

FOR DEPARTMENT USE ONLY	
Date faculty departure initiated in MyURHR	

Appendix L

External Reviewer Relationship to Candidate form

External Reviewer Relationship to Candidate Form

Please submit this form with your letter of review.

Date:	Completed by:
-------	---------------

Candidate Name:

Do you know this Candidate? _____ If yes, how long: _____ years

Do you feel you can conduct a review of the candidate's work without bias or conflict of interest (COI)?

☐ Yes ☐ No (if no, please reach out to requestor to decline participation.)

A. Which of these items describes your relationship to the candidate and your knowledge of their work.
(check all that apply)

Elaborate on your relationship in the first paragraph of your letter as to why it is not a COI if needed.

Present or past colleague at same institution (as students or trainees together, Postdoctoral fellow or faculty member)	
Present or past colleague in a national professional organization with close collaboration(s)	
Past teacher or supervising mentor	
Participated in the candidate's clinical or research training or they participated in my research	
We have coauthored an abstract, manuscript or book, or other publication	
We have been Co-Inv, or Co-PI on a research project, grant, or contract	
Other collaborations within the past 3 years, please describe:	

B. Knowledge of candidate's work based on: (check all that apply and elaborate in your letter)

I have read their CV	
I have read their publications	
Scientific presentations	
Participation on committees (review panel, national committee, study section, advisory board, etc.)	
The candidate's scholarship or body of work has engendered a national/international reputation	
Personal knowledge and discussions	
Other (please provide details in your letter):	

C Indicate areas of expertise you feel comfortable providing comment regarding the candidate:
(check all that apply)

Elaborate in your letter evidence to support your assessment.

Clinical expertise	
Teaching excellence	
Scholarly productivity	
Research excellence	

D. Resource Link for University of Rochester School of Medicine and Dentistry [Promotion Criteria](#)

Name of Reviewer: _____

Signature of Reviewer: _____ Date: _____

Form created 6/2024/tgm