# Table of Contents

- **Introduction** 1
- **Overview (rev. July 2014)** 2
  - Medical School Advisory Council (MEDSAC) 2
- **Objectives** 4
- **General Principles** 4
- **Premises** 5
  - Recognition of Faculty Contributions 5
  - Emphasis on Faculty Development 5
  - Faculty Teaching Obligations 5
  - Scholarship and Other Academic Activities 5
  - Service to the School and the University 6
  - Annual Review 6
  - Tenure Appointments (rev. July 2014) 6
- **Criteria for Appointments to Full-Time Faculty – Ranks and Tenure in Those Ranks** 7
  - Academic Appointments (rev. July 2014) 7
  - Instructor and Senior Instructor 8
  - Assistant Professor (rev. July 2014) 8
  - Associate Professor (rev. July 2014) 9
  - Professor (rev. July 2014) 12
  - Research Appointments 12
  - Professional Appointments 13
    ✐ Instructor to Professor of (Clinical) Department 13
    ✐ Assistant, Associate, Senior Associate 14
    ✐ Termination of Professional Appointments 14
- **Part-Time Appointments** 15
  - Academic Part-Time 15
  - Other Part-Time Appointments 15
  - Voluntary Clinical Faculty 15
- **Special Appointments** 16
- **Joint (Secondary) Appointments** 17
- **Procedures for Faculty Appointments and Promotions** 18
  - Professional, Service, Special and Non-Academic Part-Time Appointments 20
- **Decisions to Not Reappoint or Promote** (new July 2014) 20
- **Procedures for Appeal of Decisions** 21
- **Tenure (rev. July 2014)** 21
• Term Appointments 22
• Compensation 22
• Vacation 23
• Administrative, Financial and Other Responsibilities 24
• Sudden Termination of Employment 24
• Consulting Policy and Outside Activities 24
• Affirmative Action, Equal Opportunity, and Anti-Discrimination Statements 26
• Disability 27
• Organization and Governance 27
• Appendices
  - Ia Requirements for Promotion (new July 2014) 28
  - Ib Overview of Criteria for Promotion & Tenure (new July 2014) 28a
  - Ic Guidelines for Excellence in the Components by Rank (new July 2014) 29
  - II Curriculum Vitae Format for Promotion (rev. April 2003) 38
  - IIIa Family Leave Policy & Procedures for Extending the “Academic Clock” for Full-Time Faculty (added May 2010, rev. April 2013) 41
  - IIIb Policy & Procedures for Extending the “Academic Clock” for Part-Time Faculty 42
INTRODUCTION

Faculty and leadership of the University of Rochester Medical Center have recognized that certain elements in the current system for academic appointments, promotions, and tenure needed change in light of increasing complexities and competing demands among the various missions of the Medical Center. It is now recognized that adoption of a faculty system of greater breadth and flexibility than in the past is a requirement in addressing these new challenges.

The School of Medicine and Dentistry (SMD) is the constitutive and integrating division of the University of Rochester Medical Center. The Medical Center’s mission is to “improve health through caring, discovery, teaching and learning”. The School’s contribution to this mission can be stated as follows:

- To educate and train expert and compassionate physicians and knowledgeable and skilled research scientists.
- To foster research programs that advance basic or clinical knowledge and lead to new and effective medical discoveries or applications.
- To provide postgraduate education of physicians, scientists, dentists, and other professionals for careers of leadership in research, health care, education, and community partnerships in the clinical and biomedical sciences.
- To provide those advances in biomedical knowledge and technology with potential to contribute to exemplary health care services.

The Regulations of the Faculty for the School of Medicine and Dentistry describe a system in which faculty participate in defined academic activities and pursue a promotion pathway that best reflects the faculty member’s interests and ability to contribute to the goals of the School. These goals are represented in the key functions: teaching, patient care and research, and in administrative activities that support and enhance these principal functions. The specified appointment activity components available to faculty who have full-time or part-time academic appointments reflects the diversity of interests and capabilities required to meet the broad goals of the School of Medicine and Dentistry and Strong Memorial Hospital. These regulations state the requirements for promotions, appointments and reappointments, and the necessary ongoing review of faculty contributions.

Full-time academic appointments are reserved for those faculty who are committed to a career in some branch of academic medicine or dentistry or biomedical research and who devote their time to an appropriate combination of teaching, research, and clinical activities in the University Medical Center or in University-affiliated institutions. Other clinical or research faculty appointments are available for those whose contributions to the Medical Center are more narrowly focused or who participate in academic programs on a part-time basis. Among the latter are many community-based and regional clinical faculty whose contributions to the Medical Center’s mission are recognized.
OVERVIEW (rev. July 2014)

Promotion and reappointment require that a faculty member's qualifications and contributions are outstanding. Such contributions are initially evaluated by the department chair (and when appropriate, the center director*) who makes the request for promotion to the Office of the Dean. The chair’s recommendation is usually made with the advice of a faculty promotion committee and may include an evaluation of the relationship of the particular academic activity to other departmental or medical center programs, the space and facilities available for the activity, and the availability of fiscal and personnel support for the program. For appointment or promotion to Associate Professor or Professor, or for tenure, an internal ad hoc committee is appointed by the Dean or Senior Associate Dean for Academic Affairs to review the department’s request. Recommendations of ad hoc committees are reviewed, in sequence, by the Steering Committee of the Medical School Advisory Council (MEDSAC)**, the full MEDSAC (see footnote on page 3), the Office of the Dean, Senior Vice President for Health Sciences, the Offices of the Provost and President, and are then submitted to the Executive Committee of the Board of Trustees for final approval.

The Regulations of the Faculty, as they apply to the School of Medicine and Dentistry, provide the time limits by which promotion, reappointment, or the awarding of tenure must be achieved. Recommendations for early promotion and/or tenure are encouraged if the case is strong and future promise of continued high achievement is evident. It is the responsibility of the chair (or center director when appropriate*) to encourage the early advancement of truly exceptional faculty.

Additional information on University policies and procedures is provided by the Faculty Handbook of the University of Rochester and the University’s Personnel Policies and Procedures Manual. In the University of Rochester Faculty Handbook, the development and adoption of school or college-specific faculty rules and regulations are stipulated and allow schools to develop and implement certain policies and procedures at their discretion.

Provisions in the Regulations may be changed from time to time. The faculty will be involved in and informed of changes in accordance with procedures in the Faculty Handbook. Members of the faculty are responsible for familiarizing themselves with such changes. Clinical faculty appointed to the medical staff of Strong Memorial Hospital, Highland Hospital, the Eastman Dental Center, or other University affiliated hospitals will, in addition, be subject to the policies and procedures of all such hospitals in which they have appointments.

*All faculty in Medical School–level Centers hold primary appointments in one of the traditional academic departments of the School of Medicine and Dentistry, the School of Nursing, or The College. Financial responsibility for full-time faculty is assigned to each Institute center. Evaluations and actions pertaining to appointments, promotions, and recommendations for tenure of such faculty is the joint responsibility of the relevant department chair and the center director. This is a dual primary faculty appointment model. These interactions are implicit with respect to faculty actions throughout all relevant sections of these Regulations, even when not specifically stated.

**Medical School Advisory Council (MEDSAC)

This is a standing committee of the School of Medicine and Dentistry, whose membership includes all chairs of academic departments and all school-level center directors and similar-level leaders. Senior Associate Deans and the chairs of the Medical Faculty Council (MFC) and of the University of Rochester Medical Faculty Group (URMFG) are ex-officio members. MEDSAC meetings are normally held monthly (except for July and August) and are chaired by the Dean.

The MEDSAC’s role in the School’s governance includes, but is not limited to, the following:
receive and discuss reports from the Dean and from other senior administrative officers 
regarding various aspects of the School’s educational, research, and clinical programs; 
receive, discuss, and endorse reports of various committees, as appropriate; 
review and, when appropriate, recommend changes in policies, procedures, and academic 
programs; and 
review and act on all recommendations for faculty appointments, reappointments, and 
promotions.

Recommendations by MEDSAC are advisory to the Dean.

The Steering Committee of MEDSAC is a standing subcommittee chaired by the Senior Associate Dean for 
Academic Affairs. The committee’s principal role is to review and make recommendations on all proposals 
for appointments or promotions of academic-appointed faculty to associate professor or above and to full 
professor.

The Steering Committee consists of eighteen regular members serving three-year, staggered terms. Nine 
members are selected from MEDSAC and nine are other senior full-time faculty with a rank of full 
professor. The nine MEDSAC members are alternately selected from basic science and clinical 
departments, in sequence, so as to achieve an approximate balance between basic sciences and clinical 
disciplines. Faculty representatives are selected from a pool of nominees submitted by chairs and center 
directors so as to broaden and enhance the Committee’s representation and expertise. At the start of each 
academic year, six new Steering Committee members (three chairs or center directors and three from the 
faculty group) replace an equal number of members who have completed their three-year terms using the 
same principles with respect to representation, with the goal of maintaining the ratio of MEDSAC to non-
MEDSAC members as well as the committee’s composition with respect to discipline and area of expertise.

The Dean, the Senior Associate Deans, and the chair of the Medical Faculty Council are ex-officio 
members of the Steering Committee. Procedural and other details regarding processes for appointments, 
promotions, or other actions, and of the role of the Steering Committee and MEDSAC on such actions can 
be found in the relevant section starting on page 18.

The Medical Faculty Council (MFC) is a committee of MEDSAC whose membership comprises faculty 
representatives from each basic science and clinical department of the School of Medicine and Dentistry. 
The purpose of the MFC as well as procedures for election of its members, election and duties of officers 
and for the conduct of meetings are described in the MFC Charter and By-Laws.
OBJECTIVES

The principal objective in developing and adopting revisions to the faculty guidelines is to promote excellence in performance of all faculty, leading to enhancement of quality of all academic and clinical faculty of the Medical Center. The revised system places additional emphasis on career development and periodic review of faculty in both basic science and clinical departments and embraces accountability for performance by all faculty. An optimal system should be sufficiently flexible to meet changing needs for different types of faculty as the health-care system evolves and as an individual's needs and aspirations change. Full-time faculty appointments, promotions, and tenure should be based on the contributions the individual faculty member brings to the various missions of the Medical Center. Criteria for evaluating achievements in research, teaching, scholarship, clinical care, and service should be individualized (i.e., applied on a case-by-case basis) when judging merit and value, and comparable from department to department and center. Therefore, the individual's appointment and potential for promotion and tenure can best be assessed in terms of specific roles in the department, center and Medical Center. It is beneficial both to the faculty member and to the institution to initiate such an assessment as early as possible, providing ample time for faculty to pursue those activities that are most appropriate for promotion in their chosen career path.

GENERAL PRINCIPLES

In general, the specific terms of each faculty appointment, reappointment or promotion will be agreed upon between the faculty member and the department chair. The chair will have the flexibility to recognize positive achievements and address weaknesses in the areas of research, teaching, patient care and scholarship by allocating and reallocating departmental resources, including space or compensation or both. When disagreement arises between a faculty member and department chair with respect to allocating and reallocating departmental resources, including space or compensation or both, the case should be referred to the Dean for review in accordance with the “General Grievance Procedure” in the Faculty Handbook.

When faculty hold dual primary appointments in a traditional department and in one of the School centers, terms of such appointments as well as reappointment and actions on promotion and tenure are the joint responsibility of the department chair and center director. When disagreement emerges between a department chair and a center director with respect to a faculty member’s proposed promotion or tenure, the case should be referred to the Dean for review and resolution.

Criteria for promotion or reappointment for faculty at different levels and in the various activity components are set forth in general terms in these Regulations. For promotion and tenure, faculty will be expected to meet the principal criteria, which qualitatively define the particular activity components they have chosen for their academic development. It is understood that faculty in any given appointment and career path, although contributing to all the goals of their relevant activity components, may vary in their relative contributions to each component, but will demonstrate excellence in the various types of academic and professional activities so encompassed. When asked to make recommendations for appointments and promotions, ad hoc promotions and MEDSAC committees will weigh all qualifications, credentials, and accomplishments in arriving at their recommendations. The Senior Associate Dean for Academic Affairs is available for consultation and advice with respect to the criteria for promotion in each component. The specific recommendations and requirements will be communicated to individual faculty by the department chair or center director and through appointment, promotion, or reappointment letters.
PREAMBLES

Recognition of Faculty Contributions

The Medical Center requires a variety of academic faculty and professionals to support clinical care, to participate in education of individuals preparing for careers in health care and related sciences, and to engage in research in a range of biomedical sciences. The faculty appointment system must recognize the individual’s qualifications, academic contributions and meritorious performance in his or her chosen field of endeavor or specialty.

To accommodate faculty with wide ranging academic interests, clinical expertise, research and scholarly activities and involvement in educational programs, several components of professional activity have been established and are described below, with defined criteria for progression in each, including requirements for tenure.

To assure success in its multifaceted mission, the Medical Center recognizes and values the essential nature of all contributions and achievements of individual faculty members in all activity components. Thus all appointment types and activity components are necessary for the goals of the Medical Center, and no one of them is superior or inferior to others.

Emphasis on Faculty Development

Career planning and assessment of academic contributions of each faculty member is enhanced through a program of faculty development. The program shall include critical evaluations based on defined objectives for each individual, and shall provide periodic feedback. Such a program is viewed as a particularly important element in guiding junior faculty through their early years of academic development. Guiding faculty to pursue appropriate initiatives for their professional and academic success is the responsibility of chairs and center directors.

Evaluation of teaching, research, and clinical contributions, as appropriate, and of contributions to the intellectual environment or to committees of the Medical Center or the University and to the discipline will be included among the performance criteria in the context of any system of individual goal setting and mentoring.

Faculty Teaching Obligations

With the exception of faculty with research appointments, who have no obligatory teaching responsibilities, all faculty, whether full-time or part-time, are expected to teach. While specific teaching obligations may vary by type of appointment, faculty background and educational setting, all academic and clinical faculty have an obligation to teach as a necessary part of their contribution to the School of Medicine and Dentistry. This obligation may be met through the teaching of medical students, through undergraduate teaching, through the teaching and mentoring of graduate students and post doctoral fellows, or through the teaching and training of residents, clinical fellows, allied health professionals, community members, or other relevant constituents. The specific combination of teaching responsibilities will be established in discussion between the faculty member and the department chair.

Scholarship and Other Academic Activities

In addition to teaching, all faculty with full-time or academic part-time appointments in basic science and clinical departments are expected to contribute to scholarship. The balance between scholarship, research, teaching, clinical activities, administrative activities, and the other essential activities should be established by the chair and agreed upon by the faculty member at the time of first appointment. It should be relevant to the career path and activity components being pursued by the individual. Weight should be
given to each criterion according to an agreed-upon position description for the individual, which should include information about the professional effort to be allocated among each of the major activities. Department chairs (and, when appropriate, center directors) are responsible for such faculty position descriptions, which should be reviewed and updated at regular intervals.

**Service to the School and the University**

The School of Medicine and Dentistry recognizes that, at various times in their career, faculty may be called upon to provide their talent and expertise by serving on standing committees, ad hoc task forces or other advisory bodies of the School or the Medical Center. The deliberative or oversight functions of such committees are essential to assure that high quality operations and services are in place or in meeting vital regulatory requirements. It is recognized that time spent in such valuable service to the School or University may divert faculty effort from other academic or professional activities. Faculty participation on committees or other such organized bodies will be given due consideration at the time of promotion.

**Annual Review**

Annual faculty review should be performed by all departments and centers and is an essential element in the development and continuing academic and professional success of all faculty. Annual reviews provide an excellent opportunity for faculty to reflect on their academic progress, their professional activities, achievements, and educational contributions during the previous year. Further, annual reviews provide an excellent opportunity for faculty to discuss with the chair potential changes in their academic aspirations, career goals, or in the distribution of their effort among various activities, informing ongoing and future mentoring and faculty development activities to help the faculty member reach her/his mutually agreed-upon goals. At the time of annual review, the School of Medicine and Dentistry requires department chairs and, when appropriate, center directors to communicate, in writing, any revisions to the mutual obligations of the department and the faculty member pertaining to anticipated changes in distribution of effort amongst various activities during the subsequent year and to any corresponding changes in compensation.

*Note:* Specific guidelines pertaining to faculty compensation are described in the SMD’s “Faculty Compensation Plan” document. References to compensation principles in this or in any other section of the Regulations of the Faculty are included solely for the purpose of completion of pertinent discussion.

**Tenure Appointments** (rev. July 2014)

Tenure is generally awarded in recognition of the compilation of a meritorious body of scholarly work, typically supported by sustained peer-reviewed extramural funding, excellence in teaching, and the expectation of continued productivity leading to promotion to Professor. Appointments with tenure are available to full-time faculty in basic science or clinical departments based on accomplishments in the components of Research, Scholarship, or Institutional Scholarship, as described more fully below.

**Definitions**

The term "tenure" is defined as an appointment continuing until the faculty member resigns or retires from the University or tenure is revoked for cause, academic cause, or financial exigency of the School or University. As stated in the Faculty Handbook, the term “unlimited tenure” and “tenure” are synonymous, thus when the latter term is used in this document, it means “unlimited tenure”. “Limited tenure”, “limited term” or simply “term” appointment is defined as an appointment for a specified and limited number of years.
CRITERIA FOR APPOINTMENTS TO FULL-TIME FACULTY RANKS AND TENURE IN THOSE RANKS

ACADEMIC APPOINTMENTS (rev. July 2014)

Academic appointments are reserved for those faculty holding doctoral degrees; the rare exceptions must be specifically and carefully justified to the Dean and approved by the Senior Vice President for Health Sciences. For faculty not having a previous appointment, the initial academic appointment may be as Assistant Professor, which initiates the “academic clock”. The term “academic clock” is used to denote the specified time interval, in years, by which tenure-track faculty must be promoted beyond the rank of Assistant Professor. Faculty may be first appointed to the ranks of Instructor or Senior Instructor to provide additional time to gain experience in research, teaching or clinical practice prior to embarking on an academic career. The time spent in these ranks does not count toward the “academic clock”.

The department chair or designee guides and assists junior faculty in achieving academic objectives and departmental expectations. During the course of appointment as an Assistant Professor — ideally at the time of initial appointment, but no later than at the time of reappointment — the chair or designee and the faculty member should explicitly specify which of the following components, along with Teaching, are the primary area(s) of activity for the faculty member: Research, Scholarship, Institutional Scholarship, and/or Clinical. (These components are defined more fully below.) The academic titles for academic-appointed faculty at each rank are the same, regardless of the components of professional activity. The determination of the components in which the faculty member will be recommended for promotion or appointment is the responsibility of the chair of the department in which the faculty member holds the primary appointment. In the case of dual appointments in one of the Institute centers, it is the joint responsibility of the chair and the center director. The department chair (and center director, when appropriate) shall make this recommendation to the Dean and the MEDSAC, after discussion with the faculty member and after consultation with others who have knowledge of the faculty member’s academic strengths.

At the time of consideration of first reappointment to Assistant Professor or at any time prior to promotion or tenure, the chair, after undertaking a comprehensive review of the faculty member’s activities and potential for achieving academic excellence, may give the faculty member the opportunity to change their activity components or to move to a non-academic faculty appointment, when such a change would better reflect the faculty member’s activities and continuing contributions. A recommendation for such a change should be made after thorough consideration of its implications and only by mutual agreement between the faculty member and the department chair and, when appropriate, the center director. A recommendation to change the appointment type (at or above the level of Associate Professor) requires review by the Steering Committee or MEDSAC, as appropriate.

If a department chair decides not to recommend a faculty member for reappointment or promotion, the chair should discuss this decision with the Dean and the faculty member. A letter should then be sent to the faculty member, with a copy to the Dean, summarizing the basis for this decision. Such written notification must be given the number of months prior to the end date of the appointment that is specified for each rank.

It is the responsibility of the chairs, promotion committees, Steering Committee, and MEDSAC to interpret the School’s criteria for each appointment, to assess excellence of performance, and to strengthen the School and Medical Center through appointment and retention of faculty of the highest quality. A second and equal responsibility is to promote faculty development and protect their academic and professional interests by periodic evaluation and fair judgments.
INSTRUCTOR

This title may be given to faculty in either basic science or clinical departments with no or very limited previous academic experience who participate in an agreed upon set of activities that include an appropriate combination of teaching with other activity components (e.g., research, patient care, etc.).

The first appointment as Instructor shall ordinarily be made for one year. Reappointment may be for one or two years. Instructors will not usually be continued in this rank for more than three years. If exception is to be made to these provisions of appointment or reappointment, it shall be done after thorough review by the department and the Senior Associate Dean for Academic Affairs. The appointment to the rank of Instructor does not count toward the 6-year limit on time as an untenured Assistant Professor.

If an Instructor is not to be reappointed or promoted, notification to that effect will be made in writing by the chair of the department not later than five months before the expiration of the appointment unless an end-date was specifically indicated in the letter of initial appointment or reappointment. If such notification is given less than five months before the expiration of the appointment, then the appointment will expire five months from the date notification is given.

SENIOR INSTRUCTOR

This title may be given to faculty in basic science or clinical departments in recognition of experience beyond that expected of an Instructor.

The first appointment may be made for either one or two years and reappointment may be for one or two years. Senior Instructors will not usually be continued in this rank for more than three years. If exception is to be made to these provisions of appointment or reappointment, it shall be done only after review by the department and the Senior Associate Dean for Academic Affairs. The appointment to the rank of Senior Instructor does not count toward the 6-year limit on time as an untenured Assistant Professor.

If a Senior Instructor is not to be reappointed or promoted, notification to that effect will be made in writing by the chair of the department not later than five months before the expiration of the appointment, unless an end date was specifically indicated in the letter of initial appointment. If such notification is given less than five months before the expiration of the appointment, then the appointment will expire five months from the date notification is given.

ASSISTANT PROFESSOR (rev. July 2014)

This title is reserved for faculty members that have shown promise of and commitment to academic development in their chosen field.

Initial appointment of Assistant Professors shall normally be for three or four years. Reappointments of Assistant Professors at the end of their third year in this rank shall be for three years or at the end of their fourth year for an additional two years, unless otherwise specified in the letter of appointment. Reappointment of an Assistant Professor at the completion of the first appointment period requires a preceding departmental review of performance and of the relationship of the faculty member’s contributions to the various career components, which the department chair and faculty member may have previously selected or are prepared to select for his/her career development. No faculty ad hoc committee is required for this review. Departmental review is considered one of the more
important points in the academic career of junior faculty. As part of an ongoing development program, the faculty member’s departmental evaluation and other supporting documentation will be submitted, in writing, to the Dean whose review and approval authorizes reappointment. The faculty member will receive a copy of this evaluation. After reappointment, faculty are expected to pursue those activities that will prepare them for promotion to Associate Professor in the selected components (see Appendix for tabulation of criteria for promotion in each component).

Once the decision is made to seek promotion, the faculty member should be notified by the department to begin assembling the required documents and other information needed to advance such a recommendation to the Dean’s Office. **No later than the end of the sixth year of appointment as Assistant Professor, the decision concerning promotion to Associate Professor must be made.** For promotion to Associate Professor as an academic appointment, review by an internal faculty ad hoc committee is required (see section on Procedures for Appointments and Promotions for details).

If an Assistant Professor is not to be reappointed or promoted, notification to that effect should be made in writing by the department chair at least six months prior to the expiration of the appointment, if that appointment is for one or two years, and not later than one year prior to the expiration, if the appointment is for three or four years. If such notification is given less than six months or one year before the expiration of the appointment (depending on the length of the appointment) then the appointment will expire six months or one year from the date notification is given, again depending on the length of appointment. With the periodic advice of the chair, center director, or other designated faculty member, the evaluation of an Assistant Professor for promotion shall usually be done during their sixth year at that rank. If the sixth year is the last year of appointment and promotion is not approved, the faculty member may be reappointed for one year prior to discontinuation of the appointment. The maximum duration of appointment at this level shall be seven years. On occasion, as appropriate to the faculty member’s activities and current or emerging programmatic and strategic needs, some faculty members not reappointed or promoted as an Academic Appointment may have their appointments changed to a different type of faculty appointment (e.g., a Research or Professional Appointment) or to a staff position (e.g., Senior Project Research Associate).

ASSOCIATE PROFESSOR (rev. July 2014)

Appointment or promotion to Associate Professor is reserved for faculty who have demonstrated broad knowledge and expertise by an appropriate combination of the following activity components: 1) excellence in teaching; 2) excellence in at least one of the following: a) research or scholarship, with the promise of continued productivity and intellectually independent and creative contributions to basic or clinical science b) clinical skills and patient care practices or other professional services, or c) institution-wide scientific or scholarly contributions with significant impact on core missions of the School; 3) academic leadership; and 4) service to the School and the University. Faculty contributions may vary in depth of their emphasis in each of these activity components. Ad hoc committee review is required for appointment or promotion to Associate Professor, as well as for decisions regarding tenure and appointment or promotion to Professor.

Initial appointment or promotion to Associate Professor typically is for five years, but may be with a term of any duration of two-to-five years, or with tenure. For faculty with activity in the components of Research and Clinical, there may be a maximum of one five-year reappointment at this rank without tenure; i.e., a maximum of 10 years as untenured Associate Professor. For faculty with activity in the component Research without activity in Clinical, reappointment without tenure is not possible, i.e., a maximum of five years as untenured Associate Professor. However, at the request of the Department Chair and subject to the approval of the Dean, tenure decisions for faculty with activity in the component Research (with or without Clinical activity) may be deferred for one to three years by extending the pre-tenure appointment period; this process is intended for situations where there is reasonable expectation that the faculty
member may be viewed favorably for the awarding of tenure at the end of the extension period, e.g., after obtaining new or additional external funding. The combined total of such tenure-deferral extensions should not exceed three years.

For faculty who do not have activity in the component of Research, there shall be no limit on the number of reappointments at this rank, which are typically for five year terms but may be of any duration of two to five years, or with tenure. Reappointments require the approval of Steering Committee, but do not require internal ad hoc committee review.

If an Associate Professor is not recommended for reappointment or promotion, the Dean shall be apprised of the basis for this action, and the chair will notify the faculty member in writing at least one year in advance of the expiration of the appointment if the appointment is for four or five years; if the appointment is for less than four years, the notification period should be three months for every year in the current appointment period. If such notification is given less than one year (or the prescribed number of months) before the expiration of the appointment, then the appointment will expire at the end of the required number of months from the date notification is given.

Specific Expectations for Promotion to Associate Professor

The specific expectations of the School regarding each faculty member’s achievements are reflected in the criteria for promotion as follows: **Each faculty member must demonstrate excellence in at least one of the following areas:** Research, Scholarship, Institutional Scholarship, or Clinical (plus, for those whose only foregoing contribution is Clinical, Contributions to URMC Missions). **Each faculty member also must demonstrate excellence in teaching, and in academic service, leadership, and national recognition.** A more detailed summary of examples of each component at the ranks of Associate Professor and Professor can be found in the Appendix.

Activity Components

**Research**

Faculty with contributions in this component will have an identifiable area of scientific expertise in which they conduct intellectually independent research. Scholarly publications in appropriate high-quality, peer-reviewed journals and at an appropriate level of authorship are required. In addition, typically the faculty member’s research will be supported by independent or collaborative funding from organizations with competitive peer-review processes, or its value will be recognized by meritorious peer-reviewed grant applications (e.g., outstanding priority scores) even if not funded. National and international recognition of research in the scientific or professional discipline shall be essential for determination of excellence.

**Scholarship**

The component denoted as “Scholarship” includes a range of scholarly activities beyond the funded investigative work denoted above as “Research.” Faculty with contributions in this component will have written works, which demonstrate a developed, in-depth approach of the highest quality to an area of focused interest. Scholarly publications or other works will be in appropriate high-quality venues and at an appropriate level of authorship. National and international recognition of scholarship in the scientific or professional discipline shall be essential for determination of excellence.

**Institutional Scholarship**

Faculty with contributions in this component will have distinctive institution-wide scientific or scholarly contributions that have a significant impact on the core missions of the SMD. Faculty with excellence in this component typically have career paths revealing a sustained commitment to activities that transcend single departments or centers. Such faculty will demonstrate exceptional skills and sustained contributions in development of technologies and/or research facilities, or specialized technical,
scientific, or analytical approaches with a broad institutional impact, and documented scholarship in these endeavors. Scholarship will be judged primarily by authorship (or co-authorship) of works such as research articles, syllabi/curricula, and technical protocols available to the national and international community, where the contribution of the faculty member is clear and substantial. Other national and international recognition for this work also shall be essential for determination of excellence.

In exceptional cases, excellence in this component can reflect unique institution-wide administrative contributions that have a significant impact on the core clinical and/or research missions of the SMD, even in the absence of sustained scholarship. These contributions will be judged by their institutional impact and importance, where the contribution of the faculty member is clear, substantial and unique. Examples of such institution-wide administrative contributions may include such activities as the leadership of institution-wide initiatives to improve quality of clinical care, patient safety, clinical compliance plans and policies, and similar efforts. Since administrative contributions of this kind frequently do not present opportunities for academic scholarship or formal teaching, evidence of scholarship or formal teaching contributions may not be required in this case.

**Clinical**

Faculty with contributions in this component are most likely to be physicians or dentists with substantial patient care responsibilities, although some will be faculty with other doctoral degrees who by virtue of their training and expertise provide specialized professional services in patient care, education, research, or other aspects of URMC missions; examples include services provided by clinical laboratory scientists, radiation physicists, sociologists, and psychologists. Contributions in patient care or other professional services are expected to be of the highest quality. Regional or national recognition for clinical expertise shall be essential for determination of excellence.

**Contributions to URMC Missions**

Faculty whose only contributions among the components listed above are in clinical, i.e., those who do not have substantial contributions in Research, Scholarship, or Institutional Scholarship, are expected to actively support the academic missions of URMC. Such contributions may include the active support of and participation in education, scholarly activities including written works of various types, and the continuous enhancement of clinical services and health care delivery systems. Administrative and leadership roles in these missions may be clear evidence of such contributions. Such contributions are what distinguish faculty with academic appointments, whose primary activities are clinical and teaching, from faculty with professional appointments.

**Teaching**

All faculty with academic appointments must demonstrate excellence in teaching contributions. Teaching may be broadly construed as fostering the learning and development of any of a broad range of trainees, professionals in practice, or others, in any of a wide range of learning contexts and teaching methods. Evidence for teaching of the highest quality may include regional, national, or international recognition for teaching expertise and accomplishments.

**Service, Leadership, and National Recognition**

It is expected that faculty will use their 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. This will include administrative service of various types. Leadership may be demonstrated at local, regional, national, or international levels in the service of any of the above components, or for the department, the SMD, the University, or the field or discipline as a whole. Recognition of the faculty member’s work from outside the University is essential for determination of excellence.
This title is reserved for faculty members who have attained eminence in their chosen field. There must be demonstrable continued and sustained excellence in the components applicable to their activities, consistent with those for appointment to Associate Professor, but with: broader scope, greater originality or innovation, or greater impact on the field; funding, publication record, or contributions to URMC academic missions consistent with a greater level of distinction and preeminence; service and leadership at higher levels of administrative organization/leadership in the Department, Medical Center, University, or discipline; and with greater national and, as applicable, international recognition. Promotion to Professor may occur at any time after the criteria are met. Review for promotion to Professor requires consideration by an ad hoc committee.

Initial appointment or promotion to Professor typically is for five years, but may be with a term of any duration of two to five years, or with tenure. Reappointments as Professor (for those who do not have unlimited tenure) most often are for five years but may be for one-to-five years, and there shall be no limit on the number of reappointments. Reappointments require the approval of Steering Committee, but do not require internal ad hoc committee review.

If a Professor is not recommended for reappointment or promotion, the Dean shall be apprised of the basis for this action, and the chair will notify the faculty member in writing at least one year in advance of the expiration of the appointment if the appointment is for four or five years; if the appointment is for less than four years, the notification period should be three months for every year in the current appointment period. If such notification is given less than one year (or the prescribed number of months) before the expiration of the appointment, then the appointment will expire at the end of the required number of months from the date notification is given.

RESEARCH APPOINTMENTS

Research activities in research-intensive medical schools require faculty whose interests are principally in research and who provide special areas of expertise required for complex, collaborative research programs. Notwithstanding the prior sections in these Regulations, these appointments are governed as described below.

The titles Research Assistant Professor, Research Associate Professor, or Research Professor may, therefore, be used for persons with a doctoral degree who are engaged in research supported by a research grant, contract, or other funding. These appointments and reappointments depend on the continuation of support from programs, grants, or contracts and terminate concurrently with the cessation of the program, grant, or contract. The description of the source of funds for the appointee’s support shall be explicit and reaffirmed at each proposed reappointment so as to make the decision about the continuance of the position unambiguous. The department has an obligation to support the salary for the duration of the contractual agreement, thus appointments may be made only when support is currently available for the entire agreement term.

There is no specific requirement for formal teaching assignments. Research faculty at all ranks may be members of graduate thesis advisory committees. Research faculty who wish to mentor graduate students must obtain approval to do so from the chair of the department in which the graduate student is enrolled and from the Dean.

Research faculty may attend departmental and School meetings and participate in all activities in accordance with the rules and regulations of their department. Participation in departmental decisions regarding faculty appointments and promotions will be in accordance with departmental guidelines and the Faculty Handbook.
The factors that will be used to make the judgment as to the rank include length of experience since the award of the doctoral degree, the quality of the research training received, the quality and quantity of research publications, the focus and the depth of the research performed, and the sponsored-research funding record. For the rank of Research Associate Professor, independent peer-reviewed publications (first/senior author) and invited presentations at national and other scientific meetings are required. Independent funding for research (principal investigator or co-investigator) is highly desirable. There is no limit as to time spent in this rank, if reappointment is approved. Appointments and promotions to the rank of Research Associate Professor require review by the Steering committee of MEDSAC, whose recommendation is advisory to the Dean.

For promotion to the rank of Research Professor, the recommendation of an ad hoc promotion committee will be required. For this rank, national leadership and international reputation, independent funding (principal investigator), peer-reviewed publications (first/senior author), and invited national presentations are appointment criteria specifically required. There is no limit as to time spent at this rank, if reappointment is approved. Appointment or promotion to Research Professor requires review by the Steering Committee and of the MEDSAC, whose recommendations are advisory to the Dean.

These appointments may be made for one to five years duration. Whatever the length of the appointment, annual review by the department chair and, when appropriate, by the principal research sponsor are expected. If the faculty member is not to be reappointed, at least two months notice for each year of appointment should be given in writing by the responsible chair or center director. A copy of the termination letter should be sent to the Dean’s Office. If the requisite notification is not given, the appointment will terminate in the number of months from actual notification equal to the length of notice that would have been required depending on the length of the current appointment (e.g., two months from actual notification for a one-year appointment).

PROFESSIONAL APPOINTMENTS

INSTRUCTOR, SENIOR INSTRUCTOR, ASSISTANT PROFESSOR, ASSOCIATE PROFESSOR OR PROFESSOR OF (CLINICAL) DEPARTMENT

In some circumstances, individuals with a medical, dental, or other doctoral degree who provide principally clinical or other professional services and who may contribute significantly to teaching may be appointed full-time faculty as Instructor through Professor at the recommendation of the chair and with the approval of the Dean on the advice of the Steering Committee of the MEDSAC. For purposes of compensation and benefits such individuals shall be considered as full-time faculty and shall receive full-time benefits, and must participate in the faculty compensation plan. Appointments in this category are normally relevant to clinical departments only and are not considered academic in the same sense as those in the other appointment types, since there are no specific expectations for scholarship or research contributions. The services provided by some of these faculty may be outside the Medical Center. The title of such faculty shall have the qualifier “Clinical” preceding the name of the department or discipline, e.g., Instructor of Clinical Pediatrics, Assistant Professor of Clinical Medicine, when such a qualifier is appropriate.

Appointments and reappointments to these ranks shall be for one, two, or three years contingent on availability of salary support. The length and other elements of such appointments may be governed by additional stipulations as specified in separately executed contractual agreements between such faculty and their department or division in the Medical Center.

Promotion of faculty in this category from Instructor through Professor shall be based on periodic evaluation by the department of the clinical care, teaching and other service contributions, in accordance
with criteria and expectations appropriate to the discipline. Individuals in this category are not normally eligible for promotion beyond the rank of Associate Professor and any exceptions in this regard may be made only by the Dean, with the advice of the Steering Committee of MEDSAC. Review and recommendation by an ad hoc faculty committee is not required for appointment or promotion to Associate Professor or above in the professional service category.

**ASSISTANT, ASSOCIATE, SENIOR ASSOCIATE**

These appointments are reserved primarily for those persons whose principal responsibilities are to provide professional service in clinical or academic programs, but who also make significant contributions in teaching of students, housestaff or other trainees. For most appointments, such faculty will not have attained a doctorate degree, but will have a B.A., B.S., M.A., M.S., or equivalent degree. These appointments are not intended for administrative staff who are not actively engaged in significant teaching. These appointments will be: Assistant, Associate, or Senior Associate. Reappointments are not limited, but are to be made only after careful review of the performance of the faculty member by the relevant department chair. Appointments should be made to extend only over a period of available of funding, so that departmental and School funds will not be required to complete the term of the appointment.

**Assistant**

The title may be used to recognize accomplishments and responsibilities of individuals in supporting service and technical roles who also contribute by teaching in the academic programs of the School.

Appointments and reappointments to this rank shall be for a period of one or two years contingent on availability of salary support and superior performance, as documented in annual performance reviews.

**Associate**

The title may be used to recognize accomplishments and responsibilities of individuals performing supporting service and technical roles and who make important contributions through teaching in the academic programs of the School.

Appointments and reappointments to this rank shall be for a period of up to three years contingent on availability of salary support and superior performance as documented in annual performance reviews.

**Senior Associate**

This title may be used to recognize responsibilities and accomplishments of individuals performing outstanding supporting service in clinical or research programs, unique technical roles and who, in addition, make excellent contributions through teaching in the academic programs of the School.

Appointments, reappointments, and promotions to this rank should be made in recognition of the candidate’s experience and contributions and shall be for a period of up to three years contingent on availability of salary support and superior performance as documented in annual performance reviews.

**TERMINATION OF PROFESSIONAL APPOINTMENTS**

If a faculty member with an appointment in one of the professional categories is not to be reappointed, at least two months notice for each year in the current appointment period should be given, in writing, by the chair or supervisor; for example, minimum of two months notice for a one-year appointment and minimum of six months notice for a three-year appointment.
PART-TIME APPOINTMENTS

Academic Part-Time

In special circumstances, the department chair may recommend to the Dean that a faculty member with an academic appointment be appointed on a part-time basis. To be considered as being in an academic part-time status, the faculty member’s percent of full-time effort devoted to the School (which must otherwise represent his or her entire professional effort) must be 50% or greater. Academic titles may be used for such persons with the term "part-time" placed in parenthesis after the title; for example, Assistant Professor (part-time). The processes used for appointments or promotions and the criteria for determining the activity components and rank of academic part-time faculty are generally the same as for full-time academic faculty.

Faculty may, on occasion, have a need to move to academic part-time status to achieve better balance between professional and family priorities during a certain period. Procedures to be used by faculty and departments to request an appointment or move to academic part-time status, to request an adjustment to the “academic clock”, when appropriate, and other stipulations are detailed in Appendix III. The procedure for extending the time-in-rank (i.e. “adjusting the clock”) is based on the use of the “part-time leave” provision in the University’s Faculty Handbook. Review of such requests by chairs or center directors and by the Dean will be done in the context of assuring that programmatic, clinical service and teaching needs of the department can be met, therefore, approval of such requests should not be viewed as automatic.

Review for reappointment and promotion of academic part-time faculty is the same as for individuals in full-time status. The time in rank shall be approximately in proportion to the ratio of full-time to the part-time function as explained in Appendix III. It is the responsibility of the department chair to examine the performance of part-time faculty at periodic intervals to determine if promotion should be considered. At reappointment, faculty in this category should be advised as to their academic progress and readiness for promotion.

Academic part-time members of the faculty may be compensated in proportion to the amount of effort given in service to the University. Further, such faculty should consult the University’s Personnel Policies and Procedures Manual with respect to the potential impact of their part-time status on certain benefits.

Other Part-Time Appointments

Appointments of faculty to part-time status at less than 50% effort are possible. Compensation of such faculty is also in proportion to the percent effort devoted to school or other clinical activities. Such appointments are not considered academic. Since benefits are substantially different, faculty in this category should consult the department (or center) administrator or the University’s Benefits Office for information.

Voluntary Clinical Faculty

Members of clinical departments who make valuable contributions to patient care, teaching, or to other activities of the Medical Center, but who devote the entire or a major portion of their time to private practice or to other professional activities outside the Medical Center, may be given faculty appointments. In this case, the term "Clinical" will precede their academic titles; for example, Clinical Instructor, Clinical Assistant Professor seriatim through Clinical Professor.

Appointments and promotions to the rank of Clinical Instructor through that of Clinical Associate Professor may be made for one, two, or three years upon the recommendation of the department chair to
the Dean and to MEDSAC, in accordance with departmental guidelines. Participation in teaching in accordance with departmental guidelines is an important criterion for promotion.

Promotion or appointment or reappointment to the rank of Clinical Professor is given in recognition of any appropriate combination of superior patient care, excellence in education, participation in clinical research, professional leadership in the community or nation, and for special administrative or other contributions to the welfare of the Medical Center. The term of the initial appointment to Clinical Professor shall normally be for a period of five years. Reappointment may be for two- to five-year periods, and there shall be no limitation on the number of reappointments. Appointments to this rank require review only by the Steering Committee of MEDSAC, whose recommendation is advisory to the Dean.

Recommendations for promotion of Voluntary Clinical Faculty should include, in addition to the chair’s letter, an updated copy of the candidate’s curriculum vitae and supporting letters from individuals who are familiar with the candidate’s accomplishments and contributions. For the rank of Clinical Professor, such letters should be from colleagues who are in a position to evaluate the candidate’s clinical, educational and professional contributions or his or her leadership in the development or supervision of health care programs, or both.

No advanced notification is required if a reappointment is not recommended unless the faculty member is receiving a salary from the University. In the latter case, the faculty member should be notified two months in advance for each year in their current appointment. If the requisite notification is not given, the appointment will terminate in the appropriate number of months from actual notification depending on the length of the current appointment (e.g., two months from actual notification for a one-year appointment).

SPECIAL APPOINTMENTS

The title Visiting may be prefixed to the title of special appointees at any rank and discipline appropriate to the academic accomplishments of the individual. Appointments in this category are normally reserved for faculty from other academic institutions, clinical or research facilities, who have been invited to visit with faculty in a department or center in pursuit of collaborative academic activities. Appointment in this category should not be used as an interim step in the full-time appointment of a newly recruited faculty member. The appointments are made by the Senior Associate Dean for Academic Affairs, at the recommendation of the department chair and, when appropriate, the center director. Such appointments will not usually be made for periods longer than one year.

The title Adjunct may be used to provide faculty status for professional persons who contribute to the educational or research mission of the School but whose primary place of appointment is outside the University, usually at an institution or other organization with which the University is cooperating in some way. Appointments should be for one year, but the appointment can be renewed, if justified. Compensation is usually not provided for the contributions of adjunct faculty. Initial appointments of Adjunct faculty require, in addition to a curriculum vitae, supporting letters from the department chair, as well as from principal University faculty with whom the appointee will be collaborating, describing the role and expected contributions of the appointee in departmental programs.

The title Emeritus can be awarded to faculty at the time of their retirement in recognition of outstanding contributions to the School and University. The title Professor Emeritus or Clinical Professor Emeritus is recommended by the department chair to the Dean who, with the advice of the MEDSAC, shall recommend the appointment to the Senior Vice President and Vice Provost for Health Sciences, the Office of the President and the Board of Trustees.
The titles **Fellow** and **Departmental Fellow** are used to identify those continuing their education in advanced postdoctoral positions. These titles do not by themselves make an individual a member of the faculty, although the title Fellow may be used, when appropriate, as a qualifier in conjunction with a faculty appointment; for example, Professor and Senior Buswell Fellow.

**JOINT (SECONDARY) APPOINTMENTS**

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 or secondary appointments are functional and not honorific in nature. They are intended to benefit both the faculty member and the secondary department by enhancing collaboration in teaching, research, clinical programs and in other activities of the secondary department. Joint or secondary appointees are expected to contribute in specified activities of the department in which they have a secondary appointment, e.g., attending faculty meetings, as appropriate, participating in seminars, journal clubs, etc. Secondary appointees are not expected to serve on faculty appointment and promotions committees of such departments.

Initial secondary appointments are usually made for up to five years, but cannot exceed the end-date of the primary appointment. Reappointments are permissible, and the maximum term of each may also be up to five years. Secondary appointments will terminate automatically when the primary appointment is terminated. Reappointments should be preceded by a review of the faculty member’s participation in, and contributions to the programs of the department in which he or she holds a secondary appointment. Recommendation for a secondary reappointment should be conveyed by the chair in a letter to the Dean. At times, faculty with primary appointments in the School of Medicine and Dentistry may hold secondary appointments in a department at another School of the University or vice versa. In listing of titles, designation of the primary appointment should precede that of the secondary appointment; for example, "Professor of Medicine and of Pharmacology and Physiology", where the primary appointment is in the department of Medicine.

Faculty with full-time academic appointments in one of the School centers are considered to have dual primary appointments; i.e., primary appointments in a traditional basic science or clinical department and in one of the centers. For this reason, recommendation for initial appointment, promotion or tenure is the joint responsibility of the relevant department chair and center director. Therefore, the transmittal letter to the Dean for such proposed actions should be signed by both. Whereas academic titles are similar, titles of center appointees will also have an appropriate modifier; e.g., Associate Professor of Biochemistry and Biophysics in the Center for Oral Biology or Assistant Professor of Microbiology and Immunology in the Center for Vaccine Biology and Immunology. Since all center appointees have primary appointments in traditional academic departments, they have the same privileges and responsibilities as all other primary faculty appointees.
PROCEDURES FOR APPOINTMENTS AND PROMOTIONS


Appointments, promotions, and reappointments of all full-time faculty are initiated by a letter of recommendation from the department chair to the Dean. For any such anticipated action, the faculty member should consult with the chair of the academic department in which their primary appointment resides. Departmental administrative offices have all the necessary information, and checklists with respect to the length of the process, the types of documents that need to be completed by the candidate, letters of recommendation for each type of action, and other information that needs to be assembled prior to finalizing the chair’s recommendation to the Dean.

All faculty are responsible for maintaining a record of their past and current teaching activities. For promotion to Associate Professor and above, faculty are responsible for completing and submitting the following documents: an up-to-date *curriculum vitae* prepared in accordance with the format given in the Appendix; the Self-Assessment of Research or Scholarly Contributions form (relevant for faculty with activities in those components); and the Self-Assessment of Teaching Contributions form. A list of names and addresses of internal and external faculty or other individuals who can be requested to write letters of recommendation should be developed by the chair and should include leaders in the faculty member’s clinical or scientific discipline, who have not previously served as the faculty member’s advisor or mentor. When soliciting letters of recommendation from referees, the chair should include a copy of the candidate’s *curriculum vitae* and of the completed Self-Assessment of Research and Scholarly Contributions form, as well as an explicit statement of the activity components for which the faculty member’s accomplishments are to be assessed.

The letter of recommendation to the Dean from the chair (and center director when appropriate) should be accompanied by supporting documentation including the candidate’s *curriculum vitae* and bibliography and an evaluation from other faculty of the department who are at or above the rank to which the appointment or promotion is being recommended. In those departments that utilize a departmental promotions committee to assist the chair in evaluating the faculty member’s credentials for promotion, the chair may include a synopsis of the committee’s recommendation in the chair’s letter to the Dean.

For appointments and promotions of full-time faculty up to and including Assistant Professor, the recommendation of the chair, accompanied by the requisite number of supporting letters from internal referees, is presented to the Dean and the Steering Committee of MEDSAC for its review and recommendation. For appointments and promotions to the Associate Professor and Professor ranks, letters from faculty in other institutions should be submitted. Objective evaluations from faculty at other academic institutions, particularly those who are viewed as leaders in the faculty member’s field of research or clinical interest, are considered important in assessing the candidate’s academic contributions and national or international recognition.

The Dean will review the recommendation and the supporting documentation. If there are questions about the appointment or the documentation, the Dean will return the recommendation with comments to the chair. If the recommendation of the chair and the supporting documentation are in order, and if the Dean approves, one of two procedures will be initiated:

For reappointments for up to five years at the same rank, the recommendation of the chair is presented by the Dean to the Steering Committee of the MEDSAC. If the recommendation of the Steering Committee is positive, the candidate is recommended to the full MEDSAC (which is advisory to the Dean). If the Steering Committee believes the reappointment is not justified, and the Dean concurs, the department chair should notify the candidate, in writing, in a timely fashion of the negative decision to reappoint.
For appointments and promotions of full-time academic faculty to the rank of Associate Professor or Professor, or for the granting of tenure, or for a proposed change in status at these ranks from part-time to full-time, the Dean or Senior Associate Dean for Academic Affairs will appoint an ad hoc committee of faculty to review the recommendation and the supporting documentation received from the department chair. This committee will normally consist of three members of the full-time faculty whose academic rank is equal to or higher than the candidate’s proposed rank. Faculty from the candidate’s own academic department or center are not eligible to serve on the ad hoc committee. The chair of the ad hoc committee shall also be a regular member of the Steering Committee. Other members of ad hoc committees are selected by the Senior Associate Dean for Academic Affairs from the faculty at large in order to provide appropriate balance with respect to discipline, research focus, and activity components. The ad hoc committee’s deliberations are confidential.

The Senior Associate Dean for Academic Affairs may assign a junior faculty member (e.g., assistant professor) as an observer of the ad hoc committee’s deliberations, on condition that strict confidentiality will be maintained. Such junior faculty will be selected from a list submitted by chairs or center directors. Assignments will be made based on the view that observing an ad hoc committee’s deliberations would be most beneficial to the junior faculty member if the candidate under review is active in similar activity components, provided, however, that the observer is not in the same department as the candidate under review, and does not have other personal connections to the candidate.

The ad hoc committee will review the material submitted by the department chair and may solicit additional information considered of value in reaching a judgment. This may include additional information from the chair, other faculty in the School or elsewhere in the University. Further, the committee may seek to obtain, through the Dean, its own evaluation of the candidate from persons in other institutions in addition to any persons previously contacted by the recommending chair. These referees are selected on the basis of their scholarship and expertise in the relevant field and may not be individuals who are previous mentors of the candidate. The ad hoc committee will judge the evidence in support of the appointment or promotion based on whether the criteria are met for the identified activity components.

The ad hoc committee will submit a written confidential report to the Senior Associate Dean for Academic Affairs (SADAA). The report should include a description of all documents reviewed, the committee’s activities in gathering information, a critical evaluation of the available information and a recommendation with respect to the proposed appointment or promotion. The SADAA will transmit the ad hoc committee’s report to the department chair (and center director, when appropriate) who, in turn, will convey the essence of the committee’s assessment and recommendation to the faculty member.

If the ad hoc committee concurs with the department’s recommendation with respect to the appointment or promotion, the report will be presented to and reviewed by the Steering Committee in accordance with review procedures established by that committee. Before making a final recommendation the Steering Committee may request, through the SADAA, additional information or seek to clarify the basis of the department’s decision to request consideration of the specified activity components. For faculty actions, a minimum of ten of the eighteen voting members of the Steering Committee must be in attendance for a quorum. A YES vote by three quarters of those present will be considered a positive or favorable vote. The Steering Committee’s vote on the proposed departmental recommendation will be recorded and is advisory to the Dean. The Steering Committee’s recommendation and a summary of any relevant discussion points will be communicated by the SADAA to the chair, in writing, and the Dean will be so advised.

If the ad hoc committee disagrees with the department’s recommendation, the department chair (and center director, when appropriate) will be so informed by the SADAA and the chair has the following options: 1) accept the ad hoc committee’s report and recommendation without challenge;
2) provide further documentation to the SADAA in support of the faculty action and request reconsideration of the case by the ad hoc committee, or 3) appeal directly to the Steering Committee, in writing, with or without additional documentation; 4) depending on the outcome of this appeal, the case may be appealed directly to the full MEDSAC.

If the Steering Committee’s recommendation with respect to the proposed action disagrees with the department’s or the ad hoc committee’s recommendation, the SADAA shall report to the chair, in writing, the substance of the Steering Committee’s comments, and will include in the communication the final vote tally on the department’s original proposal or on any alternative recommendations made by the Steering Committee. The chair at this point may: 1) withdraw the recommendation for appointment or promotion; 2) accept an alternative recommendation, if any, that the Steering Committee may make; 3) assemble additional documentation in support of the original departmental recommendation and request reconsideration by the Steering Committee; or 4) appeal the decision, in writing, to the full MEDSAC with or without additional documentation.

With the Dean’s concurrence, positive Steering Committee recommendations for appointments and promotions will be presented to the full MEDSAC for information, then forwarded to the Senior VP for Health Sciences, to the Provost, President and Board of Trustees for action. Negative Steering Committee recommendations will be returned to the department for further action.

When negative Steering Committee recommendations are subsequently appealed to the full MEDSAC, they will be presented by the department chair (and center director, when appropriate) for further discussion and a final recommendation by that body, provided that any additional information or documentation that the chair assembles and plans to present in support of the appeal must be first submitted to and reviewed by the Steering Committee. A written summary of the Steering Committee’s discussion of the case will be included as part of the documentation presented to MEDSAC. The MEDSAC will judge the evidence in support of the candidate’s appointment or promotion and will make a recommendation, which is advisory to the Dean. In cases involving unlimited tenure, once a recommendation is made by the MEDSAC and the Dean concurs, it is considered final and no further appeals are possible. In non-tenure cases, the department may elect to resubmit the case for consideration, with or without a change in activity components for consideration, after a period of two years.

The department chair (and center director, when appropriate) will provide periodic feedback to the faculty member, as necessary, regarding the status of the faculty member’s case as it progresses through the review process. The final decision concerning a faculty member’s appointment, reappointment or tenure will be communicated to the faculty member, in writing, by the department chair (and center director, when appropriate).

**PROFESSIONAL, SERVICE, SPECIAL, AND NON-ACADEMIC PART-TIME APPOINTMENTS**

Appointments and promotions of these faculty are made on the recommendation of the department chair to the Dean and to MEDSAC, where appropriate. Appointments at the Associate Professor level and above require approval of the Office of the President and Board of Trustees.

**DECISIONS TO NOT REAPPOINT OR PROMOTE** *(new July 2014)*

A decision to not reappoint or promote a faculty member may be based on any of several factors, including but not limited to: failure to meet the applicable reappointment or promotional criteria; failure to sufficiently meet performance expectations for assigned roles; the nature and distribution of the faculty member’s activities do not match the current needs and mission of the department and/or Medical Center; the faculty
member’s services are no longer needed; lack of sufficient salary support; or the faculty member is not the most qualified for available positions. Faculty appointments and reappointments are, in general, closely tied to the School’s missions and to its current or emerging programmatic and strategic needs. Recruitment and retention of the most qualified candidate for each specific position are the principal objectives in meeting such needs.

PROCEDURES FOR APPEAL OF DECISIONS

If a faculty member believes that the department chair has not put forward a recommendation for reappointment or promotion at an appropriate time or in the appropriate activity component(s), the faculty member may appeal to the Dean (who may consult with an ad hoc committee), whose decision, following review of the case, will be final. In situations in which a final decision on a department chair’s recommendation has been made but in which the faculty member believes that the promotion or the reappointment process had procedural irregularities or bias, an appeal can be made according to the procedures described in the Faculty Handbook of the University in the section on “General Grievance Procedure”. The appeal must be initiated within four weeks of the time the final decision on promotion is mailed to the faculty member. The appeal procedure described in the Faculty Handbook applies equally to faculty with tenure or term appointments.

TENURE (rev. July 2014)

The School of Medicine and Dentistry is committed to protecting academic freedom through the tenure system. It will foster the faculty member’s intellectual and professional success and not restrict his or her ability to succeed in the academic discipline of his or her choice. In cases of disagreement or concern, the School should give the faculty member a fair hearing (see Faculty Handbook for hearing procedures). In return, faculty are expected to remain productive members of the University community throughout their appointment period, and compensation will be determined based on the faculty member’s efforts in this regard. Contributions by faculty will be measured differently according to their activity area. These efforts and their compensation will be determined through annual discussions between faculty members and their chair, or center director.

The term "tenure" is defined as an appointment continuing until the faculty member resigns or retires from the University or tenure is revoked for cause, academic cause, or financial exigency of the School or University. At the time of promotion to tenure, the institutional commitment, including financial commitment, will be determined and specified by the department chair and the Dean, subject to the annual review process previously described for all faculty.

Tenure is an option available only to full-time faculty with academic appointments meeting criteria based on Research, Scholarship, or Institutional Scholarship under procedures described in the guidelines for promotion.

As stated in the University of Rochester Faculty Handbook, “part-time appointments will be without tenure”. Full-time faculty with tenure who, after discussions with and approval from the chair and the Dean change to non-academic part-time status (i.e., less than 50% effort), must relinquish their tenure resulting in a new letter of appointment. Tenured faculty are eligible to request to change their appointment to academic part-time status using the “part-time leave” provision described in Appendix III. In the latter case, tenure may be retained since the part-time leave policy stipulates an interim or temporary arrangement.
Tenure appointments may be revoked for cause, academic cause, or financial exigency of the School or University, in accordance with procedures outlined in the University of Rochester Faculty Handbook ("Procedures for Revocation of Tenure"). The terms "cause" and "academic cause" shall be defined as in the University of Rochester Faculty Handbook and for the following reasons: (1) losing one’s eligibility to receive federal grants for cause; (2) in the case of faculty whose responsibilities include patient care, loss of one’s license to practice medicine or another professional discipline; (3) loss of hospital privileges; (4) engaging in activity that results in a criminal conviction for a felony or misdemeanor (as defined in New York State Penal Law, section 10.00) involving behavior that is incompatible with the duties, responsibilities, and expected conduct of a tenured faculty member; (5) engaging in behavior which poses a significant threat to patient health; (6) engaging in conduct which constitutes a conflict of interest as that term is defined in the Faculty Handbook.

The University of Rochester Faculty Handbook provides detailed procedures for grievances with respect to tenure ("Faculty Grievance Procedures").

TERM APPOINTMENTS

For term appointments, the period of appointment to be recommended will be decided before it is submitted for appropriate approval so that action will include the specified period of the appointment. In all instances of term appointments where reappointment is approved for a limited period, notification of the specified period of the extension of term of the appointment will be made by the department chair after review and approval by the Dean, the Senior Vice President for Health Sciences and Office of the President. Failure to receive notification of reappointment does not entitle a faculty member to reappointment. Upon notification of the Dean by the faculty member that notification has not been received, the Dean is generally expected to respond within two weeks.

Term appointments may be revoked for cause, academic cause, or financial exigency of the School or University, in accordance with procedures outlined in the University of Rochester Faculty Handbook ("Procedures for Revocation of Tenure"). The terms "cause" and "academic cause" shall be defined as in the Faculty Handbook and for the following reasons: (1) losing one’s eligibility to receive federal grants for cause; (2) in the case of faculty whose responsibilities include patient care, loss of one’s license to practice medicine or another professional discipline; (3) loss of hospital privileges; (4) engaging in activity that results in a criminal conviction for a felony or misdemeanor (as defined in New York State Penal Law, Section 10.00) involving behavior that is incompatible with the duties, responsibilities, and expected conduct of a tenured faculty member; (5) engaging in behavior which poses a significant threat to patient health; (6) engaging in conduct which constitutes a conflict of interest as the term is defined in the Faculty Handbook.

COMPENSATION

The regulations governing compensation arrangements for full-time faculty are described in the document entitled Faculty Compensation Plan - University of Rochester - School of Medicine and Dentistry.

In general, compensation of clinical faculty will be determined between the faculty and department chair on a case-by-case basis, based on the particular faculty member's mixture of patient care, teaching and research activities. Compensation may include various combinations of clinical income, research funding and other monies, the exact mixture of which will be determined by the chair.
Compensation of non-clinical faculty will reflect their efforts in research, education and administration. Compensation will be set by department chairs or center directors, as appropriate, on a case-by-case basis and may be derived from research funding or other funding sources. Distribution of salary among these sources will be determined by the chair or center director, as appropriate, in discussions with the faculty member. In most circumstances, faculty will receive more institutional support early in their career, with the expectation that the level provided by the institution will decline as the faculty member gains external support.

Compensation for all full-time and academic part-time faculty is set forth annually in the compensation letter from the chair or center director, as appropriate.

**VACATION**

All full-time faculty from Assistant Professor to Professor shall be granted one month (22 work days) of vacation each year. Vacation days accrue each academic year (July 1 through June 30) in proportion to the time employed by the University; that is, one day for every two and one-half weeks or fraction thereof. Faculty need to be aware of the University policy which allows only one year of vacation time to be accrued at any one time. Full-time and academic part-time faculty should consult with their chair or department administrator for the most current School policy with respect to faculty vacations and allowable floating holidays.

**ACADEMIC LEAVE OF ABSENCE**

The University encourages applications for occasional leave for scholarly and educational purposes when appropriate opportunities present themselves and when they can be arranged without expense to the University and without unduly burdening the remaining members of the department concerned. The purpose of such leaves is to increase the value of the faculty member to the School and to the University. It is believed that a leave, with carefully planned activities, can add considerably to the faculty member’s abilities as a teacher and scientist and can contribute greatly to their intellectual vigor and thereby to the improvement of the University. A leave of absence is, thus, not a periodic faculty right, but is highly regarded as an investment in the future for both the faculty member and the University. It is usually awarded to faculty in one of the academic tracks at the Associate Professor level and above.

It is for the above reasons that the University supports the leave of academic faculty up to the rate of full salary for six months, or half salary for a full year. The maximal annual salary rate while on leave is two-hundred thousand dollars or one-hundred thousand dollars for six months. This maximal annual salary rate is to be reviewed every three years by the Dean, the Senior Vice President for Health Sciences, and Provost and adjusted as appropriate. Whenever the University approves a faculty leave, it can properly expect faculty members to return to the University at the conclusion of the leave and to contribute their increased experience and knowledge to the development of their department and the University.

Each application for leave will be judged by the Dean or the Dean’s designate with full consideration of all the circumstances relating to the individual and the nature of the proposal. Arrangements for others to assume the faculty member’s duties while the individual is on leave and arrangements concerning salary must be made with the department chair and the Dean.

Whereas academic leave is generally limited to academic faculty at the Associate Professor or Professor rank, faculty in the Research category may be granted academic leave if the Dean and Provost determine that such leave will benefit the academic development of the faculty member and of the program.
in which he or she serves. Only full-time faculty at the Research Associate Professor or Research Professor ranks are eligible to be considered for academic leave.

Requests for such leave should include, but not limited to, information about the faculty member’s recent research contributions (including funding sources), description of a plan encompassing anticipated research activities during leave, and a statement on the availability and duration of funding (and by implication, the duration of the appointment) following completion of leave.

Applications for leave can be requested from the Dean's Office and should be completed and submitted at least six months before the anticipated beginning date of the leave. In such an application, all arrangements for transfer of responsibilities for education, research, and service, as appropriate, should be described and approved by the chair of the department. Final approval of all leaves rests with the President, who reports all leaves to the Board of Trustees.

Leaves of less than one month are subject to simpler procedures. Faculty who take a leave of thirty days or less should obtain permission from their chair. Where the individual is a chair, permission should be obtained from the Dean. The faculty member's location while on leave and arrangements to assure fulfillment of University responsibilities should be known to the chair. Important further details regarding various types of leaves may be found in the Faculty Handbook of the University in the Section on “Faculty Policies”, sub-sections on “Faculty Appointments” and “Leaves.”

**ADMINISTRATIVE, FINANCIAL AND OTHER RESPONSIBILITIES**

Faculty members are responsible for being familiar and in compliance with the appropriate University and Medical Center policies and procedures relative to their specific activities at the University.

**SUDDEN TERMINATION OF EMPLOYMENT WITHIN THE MEDICAL SCHOOL**

When a faculty member abruptly terminates his/her relationship with the School to take a position elsewhere or to enter private practice, there can be a deleterious impact on clinical, teaching, and research programs. If the faculty member’s decision is made without giving the department chair and School adequate notice, especially when patient care and teaching obligations would be left unfulfilled, there can be a serious disruption of academic activities. The School requests that all faculty members resigning their position make every effort to provide timely notice prior to the actual termination of their employment. The duration of notice is a function of the disruption anticipated. For junior faculty appropriate notice amounts to six months and for senior faculty, especially if they have major teaching or administrative responsibility, it is twelve months.

**CONSULTING POLICY AND OUTSIDE ACTIVITIES**

The School of Medicine and Dentistry recognizes that it is desirable for faculty to contribute to their discipline and to enhance the reputation of the School through private external consulting arrangements, while keeping faculty in touch with practical applications of their scholarly work. The University’s Faculty Handbook provides general guidance with respect to such activities, describes broad principles for engaging in consulting arrangements, identifies limitations therein, and outlines procedures for reporting such activities and for avoiding potential conflicts of interest.

In the School of Medicine and Dentistry, faculty are employed on a 12-month, full-time (or prorated part-time) appointment basis. Nonclinical consulting arrangements should be undertaken in the context of
assuring that the faculty member’s other primary responsibilities, be they clinical, research, teaching, or administration, are met. Potential conflicts between a faculty member’s external consulting activities and his or her primary responsibilities (especially with respect to patient-care requirements or those of external funding agencies), should be anticipated and discussed in advance with the department chair or center director (and with the Dean, when appropriate) and reviewed periodically, while consulting arrangements are in force.

Consulting arrangements vary widely in scope, in the degree to which they encroach on the faculty member’s time and effort devoted to the School’s affairs and in their potential for leading to the development of intellectual property and technology transfer agreements between the University and commercial organizations. In addition, compensation provisions in some consulting arrangements may need to be reviewed in the context of the School’s Faculty Compensation Plan.

Regardless of whether the consulting opportunity is with the public or private sector, the basic tenet of the University’s policy on consulting is that consulting must enhance, not reduce, the individual’s service to the University. **External consulting activity by faculty should not exceed one day per week on average during the faculty member’s primary annual appointment period.**

When presented with the opportunity to consult, a faculty member should discuss with his or her department chair the effect of the opportunity on his or her teaching, research, and administrative responsibilities. The faculty member should apprise the chair of the expected effects on his or her administrative schedule; availability for students and departmental activities; the expected gains to the department and to the individual, and the potential for conflict as defined in the “Policy on External Activities” in the University Faculty Handbook. In evaluating a given consulting arrangement, the chair should determine whether or not the Dean’s prior review and written approval is also required. Chairs may also contact the Dean if they are uncertain about comparable treatment of faculty in different departments.

Faculty have the duty to report their outside compensated activities as described in the UR Faculty Policy on Conflict of Commitment and Interest.

When faculty are contemplating entering into discussions or making arrangements for the commercial development of intellectual property resulting from their research, the chair and the Dean should be apprised of such discussions. Such arrangements must comply with the provisions of the University of Rochester’s “Policy on Intellectual Property and Technology Transfer”, which is administered by UR Ventures and the Office of Research and Project Administration (ORPA).

Further, as outlined in the Faculty Handbook, faculty are prohibited from entering into consulting arrangements or other agreements with outside entities that are inconsistent with the University Policy on Intellectual Property and Technology Transfer, and may submit agreements with outside entities to the Office of Counsel for review prior to signature for advice about changes that would be necessary to ensure the agreements are not inconsistent with University policies. Faculty are strongly encouraged to submit proposed agreements with outside entities to the Office of Counsel for such review.
AFFIRMATIVE ACTION, EQUAL OPPORTUNITY, AND ANTI-DISCRIMINATION STATEMENTS

An Inclusive Community

The University of Rochester envisions itself as a community that welcomes, encourages, and supports individuals who desire to contribute to and benefit from the institution’s missions of teaching, research, patient care, performance, and community service. In a pluralistic culture of faculty, staff, and trainees, members of the University’s community come from different geographical areas, and represent differences in ethnicities, religious beliefs, values, and points of view; they may be physically different, have different intellectual interests, or have different abilities. The success of the University of Rochester depends on an environment that fosters vigorous thought and intellectual creativity, one in which diverse ideas can be expressed and discussed by all in its community. To fulfill its missions and prepare future leaders to succeed in an equally wide-ranging environment, the University actively seeks to recruit and include diverse individuals in all aspects of the institution’s operations.

Affirmative Action and Equal Employment Opportunity Statement

In keeping with its long-standing traditions and policies, the University of Rochester affirms its commitment to non-discrimination and equal opportunity in admissions, employment, access to and treatment in University programs and activities, in accordance with federal, state, and local laws and regulations. To help establish and perpetuate an inclusive and open environment, all members of the University community are expected to support the University’s Equal Opportunity Statement:

The University of Rochester values diversity and is committed to the equal opportunity for all persons regardless of age, color, disability, ethnicity, gender identity or expression, genetic information, marital status, military/veteran status, national origin, race, religion/creed, sex, sexual orientation or any other status protected by law. The University complies with all applicable non-discrimination laws in the administration of its policies, admissions, employment, and access to and treatment in University programs and activities.

The University maintains a policy regarding Affirmative Action, pursuant to its obligations as a federal contractor, which can be found at: http://www.rochester.edu/working/hr/policies/pdfpolicies/102.pdf.

Discrimination and Harassment

The University is committed to maintaining a workplace and academic environment free from unlawful discrimination and harassment. The University prohibits and will not engage in discrimination and harassment based on any status protected by law. Further, the University prohibits retaliation against any person who complains or opposes perceived unlawful discrimination or harassment, including those who participate in an investigation or a proceeding involving a complaint of unlawful discrimination or harassment. See the University’s Policy against Discrimination and Harassment, Policy 106, found at http://www.rochester.edu/working/hr/policies/pdfpolicies/106.pdf.
DISABILITY ACCOMMODATION

The University of Rochester is committed to providing equal educational and employment opportunities for qualified individuals with disabilities, in accordance with state and federal laws and regulations. Further, the University is committed to maintaining an inclusive environment for individuals with disabilities. The University's affirmative action policy with respect to individuals with disabilities (including disabled veterans) can be found at http://www.rochester.edu/working/hr/policies/pdfpolicies/102.pdf.

ORGANIZATION AND GOVERNANCE

The School of Medicine and Dentistry is a division of the University of Rochester Medical Center, which also includes the School of Nursing and Strong Memorial Hospital. The Chief Executive Officer of the Medical Center is the University of Rochester Senior Vice President for Health Sciences. The Dean of the School of Medicine and Dentistry is responsible for oversight of the operations of the School of Medicine and Dentistry. The School is divided into Departments and Centers, overseen by a department chair and a center director, respectively.

References:
3. School of Medicine and Dentistry: Faculty Compensation Plan.
APPENDIX Ia

Requirements for Promotion

At least one:
- Research Scholarship
- Institutional Scholarship
- Clinical* + Teaching + Service, Leadership, National Recognition

*if Clinical only then also must have Contributions to URMC Academic Missions

Specific guidelines for excellence in each component at the ranks of Associate Professor and Professor are provided in the pages that follow.

Requirements for Tenure

Evidence supporting future likelihood of ongoing success as intellectually independent researcher with continued research funding

Evidence supporting ongoing preeminence in the field as a scholar

Evidence supporting eminence in institutional scholarship

To be awarded tenure, faculty member at level of Associate Professor or Professor must have ONE of the following:

- Evidence supporting the future likelihood of ongoing success as an intellectually independent researcher with continued funding as a principal or collaborative investigator, with a strong track record of successful grant applications, contracts, or other research support, especially through competitive peer-reviewed processes

- Evidence of the faculty member’s ongoing preeminence in the field as a scholar, with both:
  - A sustained record of scholarly products (publications or other) consistent with preeminence in the field, typically beyond that required for promotion in rank to Professor
  - A sustained level of impact on the field, reflected in scope or depth of impact and a superior level of originality, innovation, and/or influence

- Evidence supporting the faculty member’s eminence in institutional scholarship
  - Paramount is a sustained track record of particularly innovative or essential contributions across multiple areas of the institution, with a sustained level of impact on the institution and the field
### APPENDIX Ib: OVERVIEW OF CRITERIA FOR PROMOTION & TENURE

This is only a brief overview; please see Appendix II for more details.

<table>
<thead>
<tr>
<th>Component one of</th>
<th>Associate Professor</th>
<th>Professor</th>
<th>Tenure</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Research</strong></td>
<td>Intellectually independent investigator, supported by independent or collaborative funding</td>
<td>Continued &amp; sustained excellence as an independent investigator: broader scope, greater originality or innovation, greater impact on field, &amp; greater level of distinction &amp; preeminence as a scientist</td>
<td>Future likelihood of ongoing success as intellectually independent researcher with continued funding as principal or collaborative investigator; awarded after promotion to Associate Professor within 10 years (Research &amp; Clinical activity) or within 5 years (Research without Clinical activity).</td>
</tr>
<tr>
<td><strong>Scholarship</strong></td>
<td>Distinct identity as a scholar with area of focused expertise</td>
<td>Continued &amp; sustained excellence as a scholar: broader scope, greater originality or innovation, greater impact on field, &amp; greater level of distinction &amp; preeminence as a scholar</td>
<td>Ongoing preeminence in the field as a scholar, beyond that required for promotion to Professor</td>
</tr>
<tr>
<td><strong>Institutional Scholarship</strong></td>
<td>Expertise contributing substantially to URMC missions with collaborations across multiple Departments &amp; Centers</td>
<td>Continued &amp; sustained excellence contributing substantially to URMC missions with collaborations across multiple Departments &amp; Centers: deeper expertise, greater impact on the field or URMC, eminence in institutional contributions</td>
<td>Eminence in institutional scholarship, with sustained innovative / essential contributions &amp; impact on the institution &amp; the field; may be awarded at Associate Professor or Professor ranks</td>
</tr>
<tr>
<td><strong>Clinical</strong></td>
<td>Success as a clinician with expertise in a particular field of patient care or other professional service</td>
<td>Continued &amp; sustained excellence as an expert clinician in a field of patient care or other professional service: deeper expertise, greater clinical contributions to the field or URMC, greater recognition for expertise at national &amp; international levels, eminence as a clinician</td>
<td>——</td>
</tr>
<tr>
<td><strong>Contributions to URMC Academic Missions</strong> (required if only Clinical from above)</td>
<td>Substantial contributions in publications or other written products, participation in research or in the administration of clinical, teaching, research, or community programs</td>
<td>Continued &amp; sustained excellence as a contributor to URMC academic missions, with greater contributions to URMC or the field</td>
<td>——</td>
</tr>
<tr>
<td><strong>plus</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Teaching</strong></td>
<td>Success as an effective teacher with trainees, faculty, or other professionals</td>
<td>Continued &amp; sustained excellence as an effective teacher: eminent contributions &amp; recognition for teaching at national or international levels; mentoring &amp; fostering career development of others</td>
<td>——</td>
</tr>
<tr>
<td><strong>plus</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Service, Leadership, &amp; National Recognition</strong></td>
<td>Service to the Department, URMC, University, community, or discipline; leadership roles; recognition outside the Rochester region or nationally</td>
<td>Accomplishments inherent in above criteria at this rank: continued &amp; sustained excellence in service, leadership, and national recognition, with greater emphasis on achievements at national and (particularly for those involved with Research or Scholarship) international levels</td>
<td>Accomplishments in this component are inherent in above tenure criteria</td>
</tr>
</tbody>
</table>

Appendix Ic: GUIDELINES FOR EXCELLENCE IN THE COMPONENTS BY RANK

RESEARCH

Research — Associate Professor

Demonstrable success in developing and sustaining an identity as an independent investigator with an area of focused expertise, as evidenced by:

- Intellectual stewardship of a sustained program of research over time, which may include:
  - Continuity, with sequential hypothesis generation and testing
  - More than one line of research
  - Research funding
    - support of sustained research program through renewal or new grants or contracts as principal or co-investigator
    - obtained from organizations with competitive peer review processes
    - may include funding from other sources
    - may include meritorious peer-reviewed grant applications (e.g., outstanding priority scores) even if not funded
  - Publications in peer-reviewed journals
    - Quality as a primary determinant
      - Journal eminence
      - Demonstrable impact in advancing the field and creating new knowledge
        - Originality
        - Significance
        - Influence on subsequent work by others
    - Number of publications may vary, as the number and timing of publications are of importance primarily as evidence of sustained research productivity
    - Authorship demonstrating stewardship of the intellectual content
      - First or senior author
      - Co-authorship of papers first-authored by mentees
  - For some, may include patents or inventions
    - Impact in advancing the field as evidenced by:
      - Originality
      - Significance
      - Influence on subsequent work by others (e.g., evidence of licensing)
  - For some, may include research collaborations
    - Demonstrable contributions to multidisciplinary research teams and/or other collaborative professional or community groups, as appropriate to the field and scientific goals
    - Scientific or technical expertise playing unique and critical role(s) in team research
    - Role(s) demonstrating stewardship of at least some defined portion of the intellectual content

Research — Professor

Continued and sustained excellence as an independent investigator, with evidence for any of the following:
- Broader scope, in content area or in multidisciplinary collaborations
- Greater originality or innovation
- Greater impact on the field
- Necessarily should include independent or collaborative funding and publications records consistent with greater level of distinction and preeminence as a scientist
SCHOLARSHIP

Scholarship — Associate Professor

Demonstrable success in developing and sustaining a distinct identity as a scholar with an area of focused expertise, as evidenced by:

- **Publications**
  - May include any of the following
    - Peer-reviewed journals (at least some publications must be in this category)
    - Review papers
    - Book chapters, monographs, or books
    - Other written professional communications
    - Written communications to non-professional audiences (if relevant to area of expertise)
  - Quality as a primary determinant
    - Demonstrable impact in advancing the field
      - Originality
      - Significance
      - Influence on subsequent work by others
  - Number of publications may vary, as the number and timing of publications are of importance primarily as evidence of sustained research productivity
  - Authorship demonstrating stewardship of at least some of the intellectual content
    - First or senior author
    - Co-authorship of papers first-authored by mentees

- **Other scholarly products**
  - Examples may include
    - Course syllabi
    - Teaching manuals or other teaching materials
    - Policies, procedures, or other administrative materials
    - Audio, video, software, or other media projects
    - Patents or inventions (including evidence for impacting the field, e.g., licensing by others)
  - Evidence that these products are scholarly may include either of the following
    - Fulfills the 3 ‘Ps’
      - A clear Product that can be reproduced and built upon
      - Is open to Peer review
      - Is disseminated Publicly
    - Fulfills Glassick criteria
      - Clear goals
      - Adequate preparation
      - Appropriate methods
      - Significant results
      - Effective presentation
      - Reflective critique

- **Funding**
  - Competitive funding to support scholarship is not required
  - However, for some types of scholarship, evidence of grant funding as PI or in other roles may be
    - Necessary or helpful to enable the work’s success
    - Evidence toward fulfilling the criteria for scholarship above
Scholarship — Professor

Continued and sustained excellence as a scholar, with evidence for any of the following:

- Broader scope, in content area or in multidisciplinary collaborations
- Greater originality or innovation
- Greater impact on the field
- Necessarily should include a publication record consistent with greater level of distinction and preeminence as a scholar
INSTITUTIONAL SCHOLARSHIP

Institutional Scholarship — Associate Professor

Demonstrable success in providing expertise that contributes substantially to the Medical Center academic mission with collaborations across multiple Departments or Centers, as evidenced by:

- Evidence of broad institutional impact as reflected by collaborative funding, publications, or other activities or products typically reflecting work done across several Departments, Centers, or other areas of URMC
  - Criteria for judging excellence of funding or publications similar to that described under Research and Scholarship, except that for Institutional Scholarship, collaborative funding and publications may suffice, i.e., the emphasis may not be on independent funding or stewardship of the intellectual content
- For some, principal interests may be in development and successful implementation of academic or technical core facilities and/or in the leadership and administration of technical programs that are critical to the success of research endeavors across multiple areas of URMC, including:
  - Leadership in the development and administration of technical core facilities, with documented commitment toward the development and successful implementation of innovative technologies and approaches (i.e., more than simple and competent managerial oversight in a service capacity)
  - Broad institutional service contributions in training
- For some, principal contributions are in the form of unique institution-wide administrative contributions that have a significant impact on the core missions of URMC
  - Such contributions may include leadership of efforts to improve quality of clinical care, patient safety, clinical compliance plans and policies, or other similar activities
  - Such contributions will be judged by their institutional impact and importance, and it is expected that the faculty member’s contribution will be clear, substantial, and unique
  - Since administrative contributions of this kind may not present opportunities for scholarship or formal teaching, evidence for research scholarship or formal teaching is not required in this case
- For most, demonstrable success in developing and supporting scholarship in the institution with an area of focused expertise, as evidenced by any of the following:
  - Publications
    - May include any of the following
      - Peer-reviewed journals (at least some publications must be in this category)
      - Review papers
      - Book chapters, monographs, or books
      - Other written professional communications
      - Written communications to non-professional audiences (if relevant to area of expertise)
    - Quality as a primary determinant
      - Demonstrable impact in advancing the field
        - Originality
        - Significance
        - Influence on subsequent work by others
      - Number of publications may vary, as the number and timing of publications are of importance primarily as evidence of sustained research productivity
      - Authorship demonstrating stewardship of at least some of the intellectual content
        - First or senior author
        - Co-authorship of papers first-authored by mentees
        - Other co-authorship with distinct contribution of conceptual, technical, or other expertise
Other scholarly products
  Examples may include
  - Course syllabi
  - Teaching manuals or other teaching materials
  - Policies, procedures, or other administrative materials
  - Audio, video, software, or other media projects
  - Patents or inventions (including evidence for impacting the field, e.g., licensing by others)

Evidence that these products are scholarly may include either of the following
  - Fulfills the 3 ‘Ps’
    - A clear product that can be reproduced and built upon
    - Is open to peer review
    - Is disseminated publicly
  - Fulfills Glassick criteria
    - Clear goals
    - Adequate preparation
    - Appropriate methods
    - Significant results
    - Effective presentation
    - Reflective critique

Funding
  Ongoing research support obtained individually or collaboratively
  - obtained from organizations with peer review processes such as federal agencies, foundations, or industry
  - support of sustained research program through renewal or new grants or contracts

Institutional Scholarship — Professor

Continued and sustained excellence in providing expertise that contributes substantially to the Medical Center academic mission with collaborations across multiple Departments or Centers, with evidence for any of the following:

- Deeper expertise in one or more defined areas
- Greater contributions to the field or the Medical Center missions
- Necessarily should include evidence for eminence in institutional contributions, such as:
  - Eminence in collaborative funding, publications, or other activities or products typically reflecting work done across several Departments, Centers, or other areas of URMC
  - Eminence in the continued development and successful implementation of innovative technologies and approaches
  - Sustained, unique leadership and eminence in the administrative leadership of institution-wide initiatives that have a profound major impact on the core missions of URMC
CLINICAL

Clinical — Associate Professor

Demonstrable success as a clinician with expertise in a particular field of patient care or other professional service, as evidenced by:

- Excellence and/or innovation in one or more domains of clinical activity
  - Direct patient care
  - Collaborative care, including consultations or team-based care
  - Administration/leadership of clinical teams/sites/systems
  - Practice improvement projects with demonstrable quality improvement
  - Support or ancillary systems or services, such as medical informatics or public/community health
  - Development and testing of assessment tools
  - Other activities as appropriate for types of professional service that are not patient care, e.g., those provided by clinical laboratory scientists, radiation physicists, sociologists, psychologists, and others, or by those engaging the community to promote health or other institutionally-relevant goals
- A defined area of clinical expertise
  - Defined by content area, approach, or method for prognosis, diagnosis, or treatment
  - Important to the field or the Medical Center missions
- Achievement in clinical excellence as demonstrated by the following
  - Peer assessments (including colleagues in other disciplines or Departments)
  - National recognition for clinical expertise
  - Other metrics demonstrating success of initiatives, systems, or practice improvement projects for which the faculty member led or made substantial contributions
    - May include measures of clinical quality and/or productivity, as appropriate to the field and if robust measures exist as judged by the Department Chair or other peers in the field

Clinical — Professor

Continued and sustained excellence as an expert clinician in a field of patient care or other professional service, with evidence for any of the following:

- Deeper expertise in one or more defined areas
- Greater clinical contributions to the field or the Medical Center missions
- Greater recognition for clinical expertise at national and international levels
- Necessarily should include evidence for eminence as a clinician
CONTRIBUTIONS TO URMC ACADEMIC MISSIONS

Contributions to URMC Academic Missions — Associate Professor

While many faculty members with academic appointments make crucial contributions to URMC through clinical work and teaching without developing and sustaining a distinct identity as a researcher or scholar, such faculty members are distinguished from those with non-academic appointments (e.g., professional appointments) by substantial contributions to URMC academic missions, which may be evidenced by any of the following activities:

- Authored or co-authored publications, including case reports, review articles, book chapters, or other written communications to professional or non-professional audiences as related to professional expertise
- Other authored or co-authored written products, including
  - Course syllabi
  - Teaching manuals or other teaching materials
  - Policies, procedures, or other administrative materials
  - Audio, video, software, or other media projects
- Participation in research, including roles providing clinical or technical expertise to the development, implementation, or interpretation of investigative work that may be led by others
- Participation in the administration of clinical, teaching, research, or community programs

Contributions to URMC Academic Missions — Professor

Continued and sustained excellence as a contributor to URMC academic missions, with evidence for any of the following:

- Broader scope, in content area or in multidisciplinary collaborations
- Greater originality or innovation
- Greater impact on URMC or the field
TEACHING

Teaching — Associate Professor

Demonstrable success as an effective teacher with trainees, faculty, or other professionals, as evidenced by:

- Substantial contributions in one or more of the following areas
  - Direct teaching in research, classroom, clinical, community, or other settings
  - Mentorship
  - Career advising
  - Curriculum development / implementation
  - Educational assessment of learners, teachers, and/or curricula
  - Educational administration / leadership
- Achievement in teaching excellence
  - A clear area of teaching expertise, defined by content area, approach, or method
  - Important to the field or the Medical Center missions
  - Peer assessments (which may include colleagues in other disciplines or Departments)
  - Learner or other assessments of teaching as appropriate to the field/area/method
  - Learner outcomes as appropriate to the field/area/method
  - May include national recognition for teaching
    - Invitations to speak at other institutions or for national organizations
    - Evidence that teaching innovations are affecting others’ work or are disseminated nationally
  - May include educational scholarly products
    - Excellence of educational scholarly products as described under Scholarship

Teaching — Professor

Continued and sustained excellence as an effective teacher, with evidence for any of the following:

- Greater levels of contribution to the field or the Medical Center missions
- Greater contributions and recognition for teaching at national and international levels
- Necessarily should include evidence for eminence as a teacher
- Mentoring and fostering the career development of more junior colleagues are especially valued activities for this rank
SERVICE, LEADERSHIP, & NATIONAL RECOGNITION

Service, Leadership, & National Recognition — Associate Professor

Substantive contributions including:

- Service to the Department, Medical Center, University, community, or discipline
  - Participation on committees including review or advisory committees
  - Other administrative roles
  - Peer reviewer of grants, publications, presentations
- Leadership in any of the following activities:
  - Roles as committee chair
  - Serving on committees with oversight responsibilities, e.g., editorial boards
  - Other leadership-administrative roles that may include
    - Oversight and responsibility for groups of faculty, staff, or others
    - Oversight and responsibility for designated programs or other functional areas
    - Oversight and responsibility for organizations or designated organizational subgroups
  - Significant leadership in the community related to health improvement
- Recognition outside the University of the quality and impact of accomplishments, as evidenced by:
  - Assessments by external peer referees with expertise relevant to making such assessments
  - Invitations to present work at other institutions or national professional societies
  - Invitations to join invitation-only national professional societies
  - Service or leadership roles in the discipline at the national level, e.g., with professional societies or other institutions outside the Rochester region
  - Honors or awards from organizations at the national level or outside the Rochester region
  - Elected positions in organizations at the national level or outside the Rochester region

Service, Leadership, & National Recognition — Professor

Continued and sustained excellence in service, leadership, and national recognition, with evidence for any of the following:

- Service and leadership at higher levels of administrative organization and leadership in the Department, Medical Center, University, or discipline
- National and international recognition, with a greater emphasis on achievements and recognition at the national level and (particularly for those involved with Research or Scholarship) beyond the U.S.
- Length of service, by itself, is not a sufficient justification for promotion to this rank
Appendix II

Note: The standardized curriculum vitae format for the School of Medicine and Dentistry is all inclusive and is most useful for faculty who are being considered for promotion to Associate Professor and above. Further, some of the categories are not applicable for faculty in certain career paths.

UNIVERSITY OF ROCHESTER
SCHOOL OF MEDICINE AND DENTISTRY

Curriculum Vitae Format

CV Date:________________________

PERSONAL INFORMATION
Name
Address - Work
Telephone - Work
Spouse's/Domestic Partner’s Name
Fax Number
E-Mail Address
Date of Birth
Place of Birth
Citizenship

EDUCATION
Include names of colleges, fields of study, degrees earned and year of each degree

MILITARY SERVICE
Include branch of military and month(s)/year(s) served

POSTDOCTORAL (OR RESIDENCY) TRAINING
Include name of hospital program, research lab, and mentor, as applicable

LICENSEURE INFORMATION
Include medical license number(s) and state(s), professional board certification and specialty, as applicable

FELLOWSHIP AWARDS
Predoctoral Fellowship Award(s)
Include source of award(s)*, institution(s), purpose(s) and month(s)/year(s)

Postdoctoral Fellowship Award(s)
Include source of award(s)*, institution(s), purpose(s) and month(s)/year(s)

* NIH Training Grant, NIH Fellowship, NIH Research Grant, trainee or fellow stipend from other extramural sources, etc.
FACULTY APPOINTMENTS
Begin with present appointment, and include institution(s), rank(s) and month(s)/year(s)

PROFESSIONAL HOSPITAL AND ADMINISTRATIVE APPOINTMENTS
Include institution(s), appointment(s) and month(s)/year(s)

MEMBERSHIPS IN LOCAL AND STATE ACADEMIC AND PROFESSIONAL ORGANIZATIONS
Include organization(s), year(s) and positions of leadership, if applicable

MEMBERSHIPS IN NATIONAL AND INTERNATIONAL ACADEMIC PROFESSIONAL ORGANIZATIONS
Include organization(s), year(s) and positions of leadership, if applicable

LECTURESHIPS AND VISITING PROFESSORSHIPS
Include institution(s), appointment rank(s) and month(s)/year(s)

MEMBERSHIPS IN LOCAL AND STATE COMMUNITY SERVICE ORGANIZATIONS
Include organization(s), year(s) and positions of leadership, if applicable

HONORS AND AWARDS
Name(s), sponsoring organization(s) and year

EDUCATIONAL CONTRIBUTIONS OF LAST TEN YEARS (List separately for each year)
1. Medical Students – types of courses, number of lectures, small group sessions, number of hours of contact, laboratory, etc.
2. Graduate Students - number of students, nature of supervision, thesis advising, dissertation committees (List names of past and present students or trainees who have completed the program and indicate their current position if available.)
3. Residents – tutorial, seminar, attending, teaching rounds, research mentoring (List names of past and present students or trainees who have completed the program and indicate their current position if available.)
4. Postdoctoral Fellows - on individual research grants or training grants within department, relationship of postdoctoral fellow to faculty member
5. Continuing Professional Education – courses, number of hours of contact

PROFESSIONAL SERVICE ASSIGNMENTS AND RESPONSIBILITIES

PROFESSIONAL ADMINISTRATIVE ASSIGNMENTS AND RESPONSIBILITIES

RESEARCH ACTIVITIES
1. List research grants obtained (include sponsor, title, principal investigator, role, percent effort, total years of award, direct costs, and total dollar amount of award)
2. List research supervisory assignments (e.g., core facilities)

PRESENTATIONS AT MAJOR NATIONAL OR INTERNATIONAL PROFESSIONAL MEETINGS

EDITORIAL ASSIGNMENTS IN PROFESSIONAL JOURNALS
MEMBERSHIP AND PARTICIPATION IN NATIONAL ADVISORY AND HEALTH COUNCILS AND RESEARCH REVIEW COMMITTEES

CONSULTATIONS TO UNIVERSITIES, HEALTH, AND SCIENCE AGENCIES

PUBLICATIONS
Include author(s), full title, name of journal, volume, pages and date of publication. Book or book chapters should include the publisher’s name, editor, and name of book.

List publications, cumulatively, under the following categories:
1. Original (scientific) articles – these may include case reports if new observations were reported
2. Books, monographs, book chapters and review articles
3. Letters, editorials, short articles and other contributions
4. Abstracts can be listed separately. (Abstracts need not be included if a paper has been published describing the work. Abstracts of recent work, as yet unpublished as a full paper, can be informative.)

Note: The Steering Committee of MEDSAC has expressed concerns about the manner in which publications are listed in the curriculum vitae submitted as a part of credentials to be reviewed in faculty appointment and promotion processes. The Steering Committee has requested that the following policies be observed:

**Original Articles**
These should be listed only if they already are published or in press. Copies of those in press should be included as material to be reviewed. Papers submitted for publication should show journal name and submission date, with copies of the submitted papers included for the promotion review process. Articles in preparation should NOT be listed.

**Authorship**
Names of students, residents or postdoctoral fellows, and clinical fellows should be identified and relationship to the faculty member being reviewed should appear in the section on Educational Contributions. If it is not obvious in multi-author papers, the senior author should be identified.

**Publication Order**
List articles in chronological order.

Revised 4/2003
Family Leave Policy and Procedures for Extending the “Academic Clock” for Full-Time Faculty

A full-time academic-appointed faculty member who adds a new child (or children) to the family is entitled to a one-year postponement of the decision for reappointment, promotion, or awarding of tenure, whichever of these next follows the child’s birth or adoption. Such child-related postponements do not count toward the three-year maximum for tenure-deferring extensions of appointments as described under academic appointments for Associate Professors.

To be eligible, the faculty member must have a full-time academic appointment at the time of the birth or adoption, live in the same household as the child, and be the father, mother, or legal guardian of a newborn or adopted child up to the age of 2 years. If this faculty member, as defined above, adds a second new child to the family at a subsequent time point while continuously employed by the SMD, he or she is entitled to an additional one-year extension for a maximum of two one-year postponements.

Implementation of the postponement requires adding another year to the current appointment term. Therefore, please note that it is the faculty member’s responsibility, as soon as possible under the circumstances, to notify the Department Chair that she/he has added a new child to the family. The Chair will then notify the Office of Academic Affairs to extend the appointment term. The postponement can only be applied during the current term of the faculty member’s appointment. Also, the faculty member may choose to waive the postponement. However, even if the postponement is implemented, this does not preclude faculty members from being considered for promotion or tenure decisions ‘early’ or on schedule, as warranted by their accomplishments.

Many faculty who are eligible for the above-described Family Policy may prefer to extend the “academic clock” by working less than 100% effort (must be more than 50% effort) for reasons of: a) personal situation such as other family support; or b) a desire to maintain meaningful ongoing clinical, educational, and/or research activity in their role at SMD. In this situation, the faculty member and Chair should refer to the sections that directly follow in the Regulations of the Faculty (Appendix III-B) discussing policies/procedures for “Extension of the ‘Academic Clock’ for Part-Time Faculty.”
POLICY AND PROCEDURES FOR EXTENDING THE “ACADEMIC CLOCK” FOR PART-TIME ACADEMIC FACULTY

A. BACKGROUND, JUSTIFICATION AND GENERAL PRINCIPLES:

- The need of some faculty to work less than full-time; i.e. to carry less than full-time load, but continue to devote their entire part-time effort to the school is recognized. This may be particularly applicable to faculty who wish to continue their academic and professional pursuits, while balancing professional or family priorities. When appointed, such faculty will be considered “academic part-time”.

- Faculty wishing to pursue such an option may apply, in writing, to the department chair (and center director when appropriate) to reduce their total professional effort in the school and revert to academic part-time status. The application should specify (1) the reasons for this request, (2) the percent of full-time effort requested (must be between 50-95%), and (3) the anticipated date on which the faculty member expects to return to full-time status.

- Approval of the application will be based on utilization of the “part-time leave” provision in the Faculty Handbook. The maximum initial period for which faculty will be permitted to remain in “academic part-time” status is three years. Extensions are possible, after appropriate justifications and review of the candidate’s career goals.

- This policy is applicable only for faculty with an academic appointment at the Assistant Professor level. This policy is unnecessary for faculty with other types of appointments, or in the Instructor, Senior Instructor, Associate Professor, or Professor ranks (due to the availability of an unlimited number of reappointments). Since implementation of this policy is based on application of the “part-time leave” provision in the UR Faculty Handbook, tenured faculty applying for a change from full-time to “academic part-time” status need not relinquish their tenure, since the part-time leave policy stipulates an interim or temporary arrangement.

- When eligible Assistant Professors receive approval to move to academic part-time status, the time-in-rank may be extended by an amount proportional to the reduction in effort.

- For faculty in academic part-time status, annual salary will be correspondingly reduced in proportion to the percent effort. Whereas certain benefits may also be affected (e.g., tuition benefits), all other privileges, benefits, responsibilities, and performance expectations remain the same as those of full-time faculty.

The procedure outlined below is to be used in implementing this policy, while complying with University and School guidelines with respect to “time in rank” for promotion and tenure.
B. PROCEDURE FOR CHANGING FROM ACADEMIC FULL-TIME TO ACADEMIC PART-TIME STATUS

1) Application to the chair (and to the center director, when appropriate) and the Senior Associate Dean for Academic Affairs to change from full-time to part-time academic status is made on a two-part "leave" form at least 3 months in advance of the anticipated start date.

2) Part I should be completed by the applicant and includes fields requesting information about:

- The percent effort requested (must be >50% to qualify).
- Proposed starting date for part-time effort and anticipated date of return to full-time status
- Reason(s) for the request, and
- Anticipated impact of reduction in effort, if any, on the faculty member's role in the department with respect to educational, clinical, research, or administrative activities.

3) Part II will be completed by the chair or center director after appropriate discussion with the applicant. The chair (and the center director, when appropriate) will:

- Consider the request in the context of programmatic and other needs of the department and, (with the advice of the departmental executive committee or equivalent, when appropriate), may endorse the application, then forward it to the Dean's Office for further review and approval.
- Provide comments, if any, with respect to any anticipated changes in the faculty member's activities, potential impact on the faculty's career plan or in sources of funding for those activities.

4) The application will be sent to the Office of the Senior Associate Dean for Academic Affairs for further review, and forwarded to the Provost.

5) Once approval from the Provost's office is received in the Senior Associate Dean's office, an adjustment will be calculated to reflect the faculty member's appointment on a basis prorated for the new percent of effort. For example, if a previous full-time Assistant Professor goes to an 80% effort status and two years are remaining before he/she needs to be notified with respect to promotion or termination, the appointment interval will be increased by 20%; i.e., the notification date will be changed from 24 to 29 months (nearest whole month).

- The Dean's Office will communicate this information, in writing, to the chair (and to the center director, when appropriate), and to the faculty member.

6) Faculty needing to continue their academic part-time status beyond the original period should write to the chair or center director requesting an extension and providing the reasons for this request.

7) If the faculty member returns to full-time status earlier than the date stated in the application, the "academic clock" will be re-adjusted accordingly.