

## FACULTY SEARCH AUTHORIZATION

**Note:** This form should be completed by the Department Chair and forwarded (email or hard copy) to the appropriate Dean and to the Provost/Vice Chancellor for Academic Affairs for approval before initiating searches for full-time, part-time or adjunct faculty. **A copy of the proposed advertisement should be forwarded with this form.**

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Position Number \_\_\_\_\_

Title of position \_\_\_\_\_

Name of department (school) \_\_\_\_\_

Check one: Full time  Part time  Adjunct

Check one: Tenure track Yes  No

Check one: Replacement  New position

If replacement, name of former faculty \_\_\_\_\_

Separation date of former faculty \_\_\_\_\_

Starting date for new faculty \_\_\_\_\_

If one-year faculty, anticipated separation date \_\_\_\_\_

Current budgeted salary: \$\_\_\_\_\_ per \_\_\_\_\_

Recommended salary: \$\_\_\_\_\_ per \_\_\_\_\_

Budget Codes: Acct. \_\_\_\_\_ Dept. \_\_\_\_\_ Fund \_\_\_\_\_

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### **THIS SECTION FOR AUTHORIZATIONS**

\_\_\_\_\_  
Department Chair/Date

\_\_\_\_\_  
Chancellor/Date

\_\_\_\_\_  
Dean/Date

\_\_\_\_\_  
Provost/VC for Academic Affairs/Date

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