

Application For **Professional** Graduate Faculty Status

Name: Semester/Year Joining MSU:

Academic Unit: Academic Title:

Semester and Year of Initial Assignment to Begin:

Work Location: On Campus Off Campus

**Please provide your academic unit criteria, and how the candidate meets these criteria below.**

|  |  |
| --- | --- |
| **Criteria** | **Applicant information (please fill your information here)** |
| 1. Degree |  |
| 2. Certification: | □ YES | □ NO | □ N/A |
| 3. List of professional experiences that meet the academic unit criteria: | i. |
| ii. |
| iii. |
| iv. |
| v. |
| 4. Majority Vote of Approval | □ YES | □ NO |  |
| 5. Additional Criteria (if applicable) |  |

|  |
| --- |
| **Addendum:** Must be filled in case of applying for probational status |
| Is this application forprobation status? | □ YES □ NO |
| If YES, provide a plan or timeline for meeting criteria for full status |  |

***+ Attach a copy of current vita to application+***

You can digitally sign this document

Faculty Signature:

Date:

Academic unit Head Signature: Date:

College Dean Signature: Date: