**MICHIGAN STATE UNIVERSITY**

**College of Human Medicine**

FORM ON PROGRESS AND EXCELLENCE

**RECOMMENDATION FOR PROMOTION for CLINICAL/ADJUNCT PREFIXED FACULTY**

Name:                   Date:

 Last First Middle

Present Rank:

Primary MSU Department Community

Years of MSU service as of next July 1 as:

ASSISTANT PROFESSOR       ASSOCIATE PROFESSOR

Years of faculty experience as of next July 1 (MSU & other)

Highest Degree:       Institution:       Date:

Additional Training/Education/Certifications/Licensure

Review Period Begin Date       The review period begins with the date of first appointment/reappointment in current rank.

Current Appointment End Date       Reappointment through mass update is required if appointment ends in current academic year.

|  |  |  |
| --- | --- | --- |
|  | RECOMMENDATION BY DEPT CHAIR/SCHOOL DIRECTOR: | RECOMMENDATION BY DEAN: |
| Promote to Clinical Associate Professor  | [ ]  | [ ]  |
| Promote to Adjunct Associate Professor  | [ ]  | [ ]  |
| Promote to Clinical Professor  | [ ]  | [ ]  |
| Promote to Adjunct Professor  | [ ]  | [ ]  |
| Do not promote | [ ]  | [ ]  |

Comments (required if do not promote is selected):

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Primary Chairperson Signature Primary Chairperson Name Date

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Dean Signature Dean Name Date

# FACULTY CHECKLIST

I have included the following attachments:

[ ]  My current or most recent appointment renewal (reappointment) application.

[ ]  A brief reflective essay (1-2 pages) that:

* describes my participation in the educational, research and/or service programs of the primary academic department and college over the past five years and my intentions and plans for continuing that participation
* addresses my understanding of and demonstrated efforts to pursue the diversity, equity and inclusion goals of the college and Michigan State University.
* if submitting this application prior to completion of five years of service at MSU in the College of Human Medicine at my current rank, includes the rationale for requesting consideration for promotion at this time

[ ]  A current curriculum vitae (CV).

[ ]  A letter of support from a supervisor directly knowledgeable about performance of the MSU-related activities.

[ ]  An academic portfolio consisting of:

* Evidence I meet minimum qualifications for my current prefix (clinical or adjunct) and rank.
* Evidence of excellence in activity that would support programs of the primary academic department and CHM, in one or both of these areas:
	+ Education: one or more of these activities with CHM students and learners in CHM-affiliated programs and activities: teaching, mentoring, advising and/or career counseling;
	+ Scholarship/Research: scholarship of discovery, integration, application and/or teaching and learning;
* Evidence of engagement and/or leadership in professional organizations
* Evidence of consistent and persistent professional improvement which would serve as a basis for predicting continuing professional effectiveness and growth for the remainder of my academic career.

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Faculty Applicant Signature Date