

Faculty Nominee: _____ **Nominee Email:** _____

Degree Granting Department/Program _____

 Complete the following fields with **student information** if nominating for a specific committee:

UO ID _____ **Last Name** _____ **First Name** _____

UO Email _____

<input type="checkbox"/> *UO Non-Tenure-Related Faculty (attach CV and rationale statement describing the basis for eligibility) <input type="checkbox"/> UO Retired/Emeritus Faculty TRP? <input type="checkbox"/> Yes <input type="checkbox"/> No (attach CV and rationale statement describing the basis for eligibility) <input type="checkbox"/> UO Tenure-Related Faculty Member (no attachments required) _____ UO ID Number _____ Home Department/Program _____ Classification/Job Title	<input type="checkbox"/> *Faculty member at another university (attach CV and rationale statement describing the basis for eligibility) <input type="checkbox"/> *Practicing professional/Community member (attach CV and rationale statement describing the basis for eligibility) _____ Home Institution/Organization _____ Position/Job Title
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This person is recommended for authorization to serve as (check all that apply): <input type="checkbox"/> Chair (tenure-related only) <input type="checkbox"/> Co-Chair (tenure-related only) <input type="checkbox"/> Core Member <input type="checkbox"/> Additional Core Member only On: <input type="checkbox"/> Any dissertation committee in our department <input type="checkbox"/> Only the dissertation committee for the student named above	A note about service as an institutional representative (IR): This form cannot be used to nominate a faculty member to serve in the IR role. An IR must be an active, tenure-related faculty member from a different degree granting department/program than the student. Exceptions to that policy should be requested by General Petition.
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Department Approval:		
I have reviewed this form and all supporting material and approve this nomination.		
_____	_____	_____
Department Head Name	Department Head Signature	Date

*School/College Dean Approval (only required for UO NTTF, Non-UO faculty, and practicing professionals/community members):		
I have reviewed this form and all supporting material and approve this nomination.		
_____	_____	_____
Dean (or Representative) Name	Dean (or Representative) Signature	Date

Division of Graduate Studies Decision:	Approved	Denied
_____	_____	_____
Vice Provost or Designee	Date	Entered in GradWeb