



VASSAR COLLEGE – DEAN OF THE FACULTY OFFICE
REQUEST FOR APPOINTMENT FORM

DEPARTMENT: _____

CV ATTACHED

NAME: _____
(must be legal name)

DATE OF BIRTH: _____

ADDRESS: _____

EMAIL: _____

(Cell)
PHONE (Home): _____

TITLE: _____

FULL-TIME:

PART-TIME:

COURSES TO BE TAUGHT: _____, _____, _____, _____, _____

TOTAL UNITS: _____

CONTRACT DATES:

Year(s) _____ Semester(s): _____

New Position: _____ Replacement for: _____

OFFICE SPACE THAT HAS BEEN IDENTIFIED FOR USE: _____

_____ No Need _____

SIGNED _____
DEPARTMENT CHAIR/PROGRAM DIRECTOR

PLEASE NOTE: ITEMS IN CAPS & BOLD MUST BE COMPLETED BEFORE SENDING TO THE DEAN'S OFFICE. A CV MUST BE ATTACHED FOR NEW HIRES.

<i>This area for DoF Office use only</i>	
NEW HIRE: __ REHIRE: __	SALARY: _____ COMPLETED PH.D. AMT: \$ _____
START-UP: \$ _____	MOVING ALLOWANCE: YES \$ _____ NO
REGULAR TENURE CONTRACT: _____	ADVANCED TENURE CONTRACT: _____
ACADEMIC SUFFRAGE:	
AAUP: _____	AAUP NOTES: _____ IPED'S: _____ IPED'S NOTES: _____
CONTRACT LENGTH: _____	
SPECIAL COMMENTS: _____	
Approved By: _____	