

PROMOTION APPLICATION

Applicant Information

Last Name

First Name

Middle Name or Initial

Academic Unit or School

Current Rank

Year Rank Attained

Tenure Status

Year Tenure Attained

Year Employed at Fairmont State University

Indicate the Academic Rank for
Which You are Applying:

Professor

Associate Professor

Assistant Professor

Indicate the name and academic rank of the colleague from your school whom you have requested to submit a "Peer Evaluation Form" on your behalf.

Name of Colleague

Rank

Applicant's Signature

Date