

**Promotion and/or Tenure  
Notice of Candidate Intent**

The purpose of this notice of intent is to inform your department of your intent to become a candidate for promotion and/or tenure. Please complete this form and file it with you Department Chair. Your Chair will then forward this form to the Dean's Office. It is recommended that you discuss your candidacy with your Chair.

Name of faculty member: \_\_\_\_\_

Department/Program: \_\_\_\_\_

Academic year that you are requesting promotion and/or tenure: \_\_\_\_\_

Current academic rank: \_\_\_\_\_

Years (including current year) in rank: \_\_\_\_\_

Are you tenure eligible?                      Yes                      No

Please indicate what you are seeking (check all that apply):                      Promotion                      Tenure

If you are seeking promotion, to which rank you are applying:

Associate Professor

Professor

Clinical Associate Professor

Clinical Professor

Clinical Assistant Professor

Please sign the form and obtain signatures from your Department Chair and College/School Dean.

\_\_\_\_\_  
Signature of faculty member intending to request promotion and/or tenure                      Date

\_\_\_\_\_  
Signature of Department Chair                      Date

\_\_\_\_\_  
Signature of College/School Dean                      Date

Please note that obtaining signatures indicates support of your intent to become a candidate for promotion and/or tenure, but does not imply support for your request to be promoted and/or tenured.