



Academic Appointment Recommendation

FULL TIME ONLY

***Please use this form for new fulltime faculty appointments.**

Candidate Information

<input type="checkbox"/> New Faculty Appointment		<input type="checkbox"/> Returning Faculty Appointment		<input type="checkbox"/> Amendment	
Title	First Name	M.I.	Last Name		
Mailing Address		City	State	Zip Code	
Telephone Number (<i>Home or Mobile</i>)		Email Address:		Visa Status	
Is this individual a UMES student? <input type="checkbox"/> Yes <input type="checkbox"/> No					

Academic Appointment Information

Position Title / Rank:		Employing Department: <input type="checkbox"/> SANS <input type="checkbox"/> SESA <input type="checkbox"/> SBT <input type="checkbox"/> SPHP <input type="checkbox"/> Library Services			
Preparer Name:		Preparer Email:			
Does the candidate have or anticipate a concurrent academic or exempt appointment in another department or unit?					<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please provide the name of the department/unit		Percentage of concurrent appointment			
Is this a Tenure Track Appointment?			<input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes please provide the academic year for tenure review:					
Type of Contract		Appointment Period			
<input type="checkbox"/> 9 Month <input type="checkbox"/> 12 Month		Start Date		End Date	
Special Conditions (<i>Please specify course information and or any special conditions to be included in the contract</i>)					

Budget Information

Salary Rate:	FAS and/or Funding Source:

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I certify that the above information is correct:

Department Chair / Director:	Date:
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Approvals:

Employment Manager:	<input type="checkbox"/> Resume <input type="checkbox"/> Application <input type="checkbox"/> Letters of Recommendation / References <input type="checkbox"/> Background Check Completed <input type="checkbox"/> Official Transcripts	Date:
Director of Human Resources:		Date:
Grant Accountant / Title III / Sponsored Programs: (If Applicable)		Date:
Budget Director: (Budget Reviewed & Approved for Use)		Date:
Dean:		Date:
Provost:		Date:
VP of Administration and Finance:		Date:
President:		Date:

Important Reminders:

- Please ensure that every field is complete and accurate before uploading into Dropbox Sign.
- When uploading the document into Dropbox Sign remember to put the correct signature order and select “set signing order” under signer settings.
- Copy facultycontracts@umes.edu to ensure that the completed form is received and the contract issued.