

APPLICATION FOR DSI – CHECKLIST

PART-TIME FACULTY

Name of faculty member:		
Last Na	ame First !	MI
Depar	tment:	
Report	ting period:	
	E COMPLETED BY THE CANDIDATE ving is a list of the required documentation, in the exact order in which it should app	pear in the file.
Please	e select Yes or No for the documentations included in the file:	
YES	NO	
	1. Review/Cover sheet (included with call letter)	
	2. This checklist (included with call letter)	
	☐ 3. Current curriculum vitae in SUNY New Paltz format (see current year DSI guidel	ines)
	4. Brief list outlining accomplishments (3 pages maximum)	
	5. List of courses, etc. (see current year DSI guidelines)	
	6. Syllabi for courses in #5 (see current year DSI guidelines)	