New Paltz STATE UNIVERSITY OF NEW YORK

APPLICATION FOR DSI – REVIEW SHEET

PART-TIME FACULTY

This is a consolidated cover sheet reflecting discretionary award recommendations from the department subcommittee (or committee of the whole), department chair and the dean.

Pepartment	Last Name	First		MI
RECOMMENDATIONS Inter review/rationale is completed, type your name, enter the date and submit to next level. Department Subcommittee Recommendation Major Merit No Award Submitted by Subcommittee Chair Subcommittee Chair Subcommittee Chair Department Chair Recommendation Major Merit No Award Submitted by Department Chair Department Chair Recommendation)epartment			
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Department Chair	Department Chair Recommenda	tion		
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Rationale:			
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	FINAL	DECISION	

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