

APPLICATION FOR DSI – REVIEW SHEET

PART-TIME FACULTY

Reporting Period: January 1 – December 31, 2023

Name of faculty member: _____ **Department** _____

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

After review/rationale is completed, type name and date, submit to next level.

Department Subcommittee Recommendation:

Major

Merit

No Award

Rationale:

Submitted by:

Subcommittee Chair - Printed Name

Date:

Department Chair Recommendation:

Major

Merit

No Award

Rationale:

Submitted by:

Department Chair - Printed Name

Date:

Dean Recommendation:

Major

Merit

No Award

Rationale:

Submitted by:

Dean - Printed Name

Date: