## University Committee on Academic Rank and Tenure

## Recommendation of External Reviewer for Evaluation of Tenured or Tenure-Track Faculty

1. **Candidate’s Name (print):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. **Applying for Promotion to:**

**Assistant Professor  Associate Professor  Professor**

**Other:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Applying for tenure:**

**Yes  No**

1. **School / College / Center:** \_\_School of Medicine\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. **Department of Primary Appointment (print):**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **Department Chair (print):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

My knowledge of the candidate’s work is based primarily on:

1. Publications and C.V. \_\_\_\_\_\_\_\_
2. Scientific Presentations \_\_\_\_\_\_\_\_
3. Personal knowledge and discussions \_\_\_\_\_\_\_\_
4. Participation on review panels, study

sections, advisory boards, etc. \_\_\_\_\_\_\_\_

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Evaluator’s Name (please print) Date

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Position Title (please print)

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Affiliation (please print)