

**COVERING SUMMARY OF PROPOSED ACTION
UNIVERSITY COMMITTEE ON RANK AND TENURE**

Name: _____ **Present Rank:** _____

Department and School: _____

University: (If not GU) _____

Date of First Full-Time Appointment at Georgetown University: _____ / _____ / _____

Tenure Already Granted: _____ Yes _____ No

Action Requested: (Check appropriate boxes)

Appointment As _____ **Tenure Requested**
 Promotion To _____ **Tenure Not Requested**
 Grant of Tenure Only

Record of Faculty Action: (Record the name of each committee taking action with separate votes on appointment or promotion and tenure)

(1)	Name of Committee Taking Action			
	For Appointment or Promotion	In Favor	Opposed, with _____	Abstaining
(2)	For Tenure	In Favor	Opposed, with _____	Abstaining
	Name of Committee Taking Action			
(3)	For Appointment or Promotion	In Favor	Opposed, with _____	Abstaining
	For Tenure	In Favor	Opposed, with _____	Abstaining
(3)	Name of Committee Taking Action			
	For Appointment or Promotion	In Favor	Opposed, with _____	Abstaining
(3)	For Tenure	In Favor	Opposed, with _____	Abstaining

Extramural Evaluations Included: (Name, Title and Institution of external evaluators)

(If necessary, continue list of extramural evaluations on a separate page; title "Covering Page 2")

Teaching Evaluations: _____ **GU Rank and Tenure Committee Forms**

_____ **Other Forms** (Please Specify) _____

_____ **Table of Contents Included**

_____ **All Pages of Application Numbered Consecutively**