Request for Rank Advancement

(Appendix B)

Name: _____ Date: _____

Academic Rank Applying for: _____

Present Academic Rank: _____ Date conferred: _____

Date of hire at UVU: _____ Years on tenure track/date of conferral: _____

Please list all qualifying tenure-track teaching positions, including rank, institution, & years

Rank	Institution	Years

Please list all qualifying degrees or credentials, granting institution and the year completed

Degree/Credential	Institution	Year

I _____ hereby apply for rank advancement _____

(printed name) (signature)

	SIGNATURE	RECOMMENDATION	DATE
Department RTP Chair	_____	Yes / No	_____
Department Chair	_____	Yes / No	_____
Dean	_____	Yes / No	_____
President	_____	Yes / No	_____

Action by UVU Board of Trustees: Approve / Disapprove Date: _____

Requests for Rank Advancement must be submitted to the appropriate Department RTP Chair no later than December 15th. Faculty should refer to UVU Policy 632, *Assignment and Advancement in Academic Rank* here: https://policy.uvu.edu/getDisplayFile/563a405c65db23201153c27b.

(Revised 9/18)