



PROMOTION COVER SHEET

Name _____

Department/Program _____ Present Rank _____

Requested Personnel Action	
Promotion	
_____	Promotion (effective July 1 following approval)
_____	To rank of assistant technical professor
_____	To rank of associate technical professor
_____	To rank of technical professor

Please for each appropriate response below:

<input type="checkbox"/> Recommend Promotion	<input type="checkbox"/> DO NOT Recommend Promotion
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_____	_____	(Department Head as Reporter of Faculty Poll Results)	(Date)
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Promotion: Votes for: _____ Votes against: _____ Abstentions: _____

_____	_____	(Department Head)	(Date)
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_____	_____	(Chair, Ten/Prom University Committee)	(Date)
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Promotion: Votes for: _____ Votes against: _____ Abstentions: _____

_____	_____	(Vice President)	(Date)
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_____	_____	(President)	(Date)
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For office use only: Date of promotion by the Colorado Mesa University President: _____