

Suffolk County Community College

Form A1

Application for Promotion in Adjunct Faculty Rank

Name	Date
Discipline or Department	Area or Division

Primary Campus of Current Assignment	
<input type="checkbox"/> Ammerman	Total Semesters at SCCC
<input type="checkbox"/> Eastern	Semesters in Present Rank
<input type="checkbox"/> Grant	Credit Hours Taught/Worked in Present Rank College-wide

Present Rank:		
<input type="checkbox"/> Instructor	<input type="checkbox"/> Assistant Professor	<input type="checkbox"/> Associate Professor
<input type="checkbox"/> Professional Assistant	<input type="checkbox"/> Professional Assistant 1	

Educational Preparation						(Administrative Use Only)
Institution	Period of Attendance	Major	Minor	Degree/Diploma Credits		Transcript in File Verified by Name Date

Candidate's Statement:
<p>I meet the educational and time-in-rank requirements for promotion in adjunct rank. I hereby apply for promotion to the rank of _____. I certify that all of the statements made in this application are true to the best of my knowledge. I understand that it will be necessary for the Chairperson of the College Personnel Committee (or designee) and for administrators responsible for my evaluation to review my personnel folder in connection with this application. I consent to such review, hereby waiving any right to privacy that may exist, and release the College from any liability relating to such review.</p>

Signature:	Date:
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Name of Candidate:

Performance of Professional Responsibilities-Classroom Teaching, Counseling, Librarianship, Professional Assistant Duties:

Candidate should state why promotion at this time based upon performance of professional duties qualifies for consideration. Cite new or innovative techniques, methods, procedures, or substantial improvements accomplished. Evidence based on student feedback, work toward retaining students, new work procedures or programs initiated, or substantial improvements in policies, procedures, or systems should be included, if applicable.

Candidate's Statement:

Other Information (optional):

Please include any other information that supports your promotion, i.e. committee assignments, program reviews, service on college advisory or community boards, or other community activities that bring demonstrated benefit to the College.

Verification: The above statements supported by documents in the candidate's file.

Signature of Associate Dean for Professional Advancement:

Date: