REQUEST FOR TRANSFER OF PRIMARY APPOINTMENT

A. Faculty member: _____
First name Middle initial Last name Degree

Currently in the department of_____
(including location/affiliated hospital, if applicable)

As (academic rank and tenure status)_____

Requests transfer to department of _____
(including location/affiliated hospital, if applicable)

B. Attachments:

- ❑ Request for transfer (letter to the dean from chair of the department to which the faculty member wishes to transfer). This letter should explain the basis for the requested transfer and any proposed salary change.
- ❑ Written verification that former chair has been notified of the planned change.
- ❑ Faculty member's concurrence with the proposed transfer (and with change in meaning of tenure if applicable).
- ❑ Affirmative vote of the new primary department committee on appointments, promotions, and tenure
- ❑ Faculty member's curriculum vitae

Please route all materials to Dan Anker, Office of Faculty Affairs and Human Resources, by campus mail to SOM, 4915, by fax to 216/368-3013, or by delivery to W171.

For faculty affairs office use:
Faculty affairs memo to candidate re: meaning
Of tenure if applicable _____
Dean's final approval _____
Copy of approval to administrative services _____