



- ☐ **Renewal**
☐ **New Appointment**
☐ **Revision**

Appointment to the Graduate Faculty
(a copy of the curriculum vitae must be included)

Name: _____	Today's Date: _____
Academic Rank: _____	Email address: _____
College Appointing: _____	Dept / School Appointing: _____
Home College (if KSU): _____	Home Dept / School (if KSU): _____
Highest Degree: _____	University Degree awarded: _____
Date Degree Awarded: _____	

Semester Appointment Effective: _____

Year: _____

Check appropriate categories below:

- ☐ **Associate Member**
- ☐ **Full Member**
- ☐ "D" List Professor (*Has DIRECTED or CO-DIRECTED a Dissertation to completion.*)

☐ **Temporary Member**

List educational activities under this appointment:

Graduate Committee to serve on: _____

Duration of Appointment:

From:
To:

Month:
Month:

Year:
Year:

Signatures:

Approved by Appointing Chair/Director: _____ Date: _____

Approved by Home Chair/Director (if KSU): _____ Date: _____

Approved by Dean: _____ Date: _____

Please send copies to:

Original: To be retained by appointing College Graduate Office
1 Copy to: Home College Graduate Office
1 Copy to: Division of Graduate Studies
1 Copy to: Graduate Chair/ Director/ Graduate Faculty Member