

Case Western Reserve University  
College of Arts and Sciences

**APPOINTMENT FORM**

[Revised July 2015]

Date \_\_\_\_\_

**NOTE:** Attach current CV

Department \_\_\_\_\_

Dept No \_\_\_\_\_

Appointee's Name \_\_\_\_\_

Current Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

CWRU Rank \_\_\_\_\_ Salary \_\_\_\_\_

(Indicate payment period: 12 mos, AY, Semester)

Period of Appointment \_\_\_\_\_

Date of Birth \_\_\_\_\_

Is the appointee a US Citizen or permanent resident? Yes \_\_\_\_\_ No \_\_\_\_\_

If no, contact the Office of Immigration and HR Services. Attach to this form the appropriate Exchange Visitor form or written verification from OIHR that no form is required.

Will the appointee be using or potentially be exposed to human blood and/or tissue? Yes \_\_\_\_\_ No \_\_\_\_\_

Has the appointee held any previous position in the College of Arts and Sciences? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, provide date(s) and rank(s): \_\_\_\_\_

\_\_\_\_\_

Source of funding: \_\_\_\_\_

\_\_\_\_\_

If the appointment is at the rank of Research Associate or Senior Research Associate, please indicate supervisor.

\_\_\_\_\_

Have the appropriate Affirmative Action materials been submitted? Yes \_\_\_\_\_ No \_\_\_\_\_

Date Submitted \_\_\_\_\_

N/A for this appointment \_\_\_\_\_

Certification of Terminal Degree:

\_\_\_\_\_ Official Transcript

\_\_\_\_\_ Letter from Dean of Graduate Studies

PhD / MFA not yet in hand; expected date \_\_\_\_\_

Appointee's Name \_\_\_\_\_

**JUSTIFICATION FOR THE APPOINTMENT** (This section MUST be completed. Use separate sheet if necessary.)

**TEACHING ASSIGNMENT** – For each course to be taught, list the following:

Course Name \_\_\_\_\_  
Course No \_\_\_\_\_ Credit Hrs \_\_\_\_\_ Expected Enrollment \_\_\_\_\_ Semester \_\_\_\_\_

Course Name \_\_\_\_\_  
Course No \_\_\_\_\_ Credit Hrs \_\_\_\_\_ Expected Enrollment \_\_\_\_\_ Semester \_\_\_\_\_

Course Name \_\_\_\_\_  
Course No \_\_\_\_\_ Credit Hrs \_\_\_\_\_ Expected Enrollment \_\_\_\_\_ Semester \_\_\_\_\_

Course Name \_\_\_\_\_  
Course No \_\_\_\_\_ Credit Hrs \_\_\_\_\_ Expected Enrollment \_\_\_\_\_ Semester \_\_\_\_\_

Course Name \_\_\_\_\_  
Course No \_\_\_\_\_ Credit Hrs \_\_\_\_\_ Expected Enrollment \_\_\_\_\_ Semester \_\_\_\_\_

Course Name \_\_\_\_\_  
Course No \_\_\_\_\_ Credit Hrs \_\_\_\_\_ Expected Enrollment \_\_\_\_\_ Semester \_\_\_\_\_

**For Part-time Lecturers and all compensated Adjunct Appointments:** List all additional duties per week (not including teaching or teaching preparation) and the required hours for each.

**Office Hours:** \_\_\_\_\_ hours

**Advising:** \_\_\_\_\_ hours

**Weekly Meetings (including Orientation):** \_\_\_\_\_ hours

**Other Required Duties (please specify):**

**Duty:** \_\_\_\_\_ hours

**Duty:** \_\_\_\_\_ hours

**Duty:** \_\_\_\_\_ hours

**SIGNATURES:**

\_\_\_\_\_  
Department Chair

\_\_\_\_\_  
Date

\_\_\_\_\_  
A&S Office of Finance and Administration

\_\_\_\_\_  
Date

\_\_\_\_\_  
Dean

\_\_\_\_\_  
Date

\_\_\_\_\_  
Provost's Office

\_\_\_\_\_  
Date