ATTACHMENT #1 FOR FACULTY PERFORMANCE ASSESSMENT

Tenure or Release Recomn	nendations
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Signature (Department Chairperson) Date

Tenure or Release Recommendations
Please indicate if this faculty member is to be retained in probationary status, is to be recommended for tenure, or is to be recommended for release. Faculty members who are not to be granted tenure must be notified in accordance with the deadline dates indicated in the <u>Faculty Handbook</u> . Explicit reasons should be cited in support of your recommendation, based upon the criteria in the <u>Faculty Handbook</u> .

Signature (Dean)

Date