BOSTON UNIVERSITY RECOMMENDATION FOR RESEARCH FACULTY APPOINTMENT

Name (Last, First, MI)		Social Security Number	Academic Year
School-Department		Rank	% Time
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Appointment Period From To		Total Salary	Funding Sources
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Work Authorization Status: ☐US Citizen/Perm Resident ☐Visa (type) (exp) ☐Other			
Chair's Evaluation			
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SIGNATURES Chair	Data	Doon	Data
Citati	Date	Dean	Date
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Other	Date		