

HENRY M. GOLDMAN SCHOOL OF DENTAL MEDICINE**Initial Appointment or Promotion Log****Recommendation for:**MODIFIED APPOINTMENTS ONLY
(Clinical, Research, Adjunct, Emeritus)

- ☐ Initial Appointment
☐ Promotion
☐ Change in Title
☐ Secondary Appointment

Name: Last, First, MI, Degree(s)	BUID Number:	Effective Date:
Department:	Section:	

	Rank	Appointment Period	
		From	To
Initial Appointment (or Current Rank):			
Recommended Appointment:			
Secondary Appointment/Department (if applicable):			

Appointment & Promotion Committee Votes:

	Meeting Date	For	Against	Abstaining	Absent
Department Committee:					
Secondary Department Committee (if applicable):					
GSDM Faculty A&P Committee:					
GSDM Executive Committee:					

Employment Status	Paid	Volunteer
Percent time:	%	%

Teaching Responsibilities or Rationale for Change:

Signatures

Name of Chair:	Signature:	Date:	GSDM Dean:	Date:
Name of Secondary Dept. Chair:	Signature:	Date:	Provost (unmodified appointments only):	Date: