



APPLICATION FOR GRADUATE FACULTY DESIGNATION

LAST NAME	FIRST NAME
-----------	------------

HOME DEPARTMENT:	PROGRAM:	CROSS-APPOINTMENT: Yes No (Attach Appointment Letter)
------------------	----------	--

FULL GRADUATE FACULTY STATUS

Tenure/Tenure Track Faculty (Teaching Intensive Faculty – see below)
Emeritus Professor

AFFILIATE GRADUATE FACULTY STATUS

Limited Term Appointment (LTA) – Attach Appointment Letter
Ancillary Academic Staff (AAS)
Adjunct (Community/Industry Partners, Teaching Intensive Faculty, Sessional Lecturers) – Attach Appointment

CRITERIA

POSSESSION OF A PHD OR EQUIVALENT

Degree: _____ Institution: _____ Date: _____

INVOLVEMENT IN GRADUATE TEACHING AND SUPERVISION
(supervision, internal or external program reader, course(s) taught)

Number of graduate students supervised in the past FIVE years: _____

List all graduate courses taughts in the past FIVE years (use attachment if additional space needed):

REFEREED PUBLICATIONS OR EQUIVALENT FOR THE DISCIPLINE

List at least two referred publications from the last four years (use attachment if additional space needed):

SIGNATURES

Graduate Applicant Signature: _____ Date: _____

Department Head (if applicable): _____ Date: _____

Faculty Dean: _____ Date: _____

INSTRUCTIONS FOR SUBMISSION OF FORM AND ATTACHMENTS

- ➡ Complete application and sign form.
- ➡ Attach academic CV.
- ➡ Attach appointment letter (if applicable).
- ➡ Send to Department Head for approval (if applicable)
- ➡ Head sends form to the Faculty Dean for approval and signature.
- ➡ Faculty Dean sends signed application and documents to Graduate Studies (gradst@uwindsor.ca)
- ➡ Policies and Criteria: [Graduate Faculty Members](#) | [Faculty of Graduate Studies \(uwindsor.ca\)](#)