

2026-2027 PROMOTION AND TENURE RECOMMENDATION

Administrative Form

Please type and fill in all appropriate fields.

Name WSU ID

Current Rank

Pre-Tenure Tenured Career-Track — Subtrack

Academic Annual 10-Month

Full-Time (100% FTE) Part-Time (% FTE)

Campus Department

Date of Appointment within Current Track Tenured Year

Tenure Eligibility Year Year of Third-Year Review

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Unit* Chair Dean Chancellor

Grant Tenure

Deny Tenure

Promote

Defer Promotion

**Indicate numbers for each*

.....

Describe unit
review process

Workload Distribution

Please list workload expectations at the time of dossier submission. Changes in workload expectations over time should be included in chair's analysis, as necessary. The sum of the categories should be 100%, regardless of FTE.

Teaching

Scholarship

Service

Extension

Clinical Practice

Librarianship

Administration

Other



Chair's Analysis and Recommendation

Additional space available on next page.

Chair's Analysis and Recommendation (Continued)

Additional comments may be added as an attachment.

Chair's Signature

Date

Chair's Name

Dean's Analysis and Recommendation

Additional comments may be added as an attachment.

Dean's Signature

Date

Dean's Name

EVP for WSU Statewide Campuses/VCAA's Signature

Date

EVP for WSU Statewide Campuses/VCAA's Name