INTENSIVE REVIEW – Administrative Form

YEAR

NAME	WSU ID#				
	ANNUAL		10 MONTH		
DEGREE	DEGREE YEAR				
TITLE					
COST CENTER			% SERVICE _		
DEPARTMENT					
DATE OF APPOINTMENT TO WSU _					

Rating:

Well prepared (WP). The candidate is encouraged to seek tenure and/or promotion at the next opportunity.

Satisfactory (S). The candidate appears to be building an appropriate profile, but has not yet achieved the standards expected for tenure and/or promotion.

Improvement needed (IN). The candidate should review the criteria for tenure and/or promotion and the career progress report carefully, and seek advice from other faculty in the University and his or her discipline.

Unsatisfactory (U). The candidate is not on track for tenure and/or promotion.

FINAL ACTION - *Indicate numbers for each							
	AREA*	CHAIR	DEAN	CHANCELLOR	PROVOST		
WELL PREPARED							
SATISFACTORY							
IMPROVEMENT NEEDED							
UNSATISFACTORY							

Below, explain in detail the rationale for the ranking provided above. Explicitly provide explanation of needed areas of improvement; including an assessment of the likelihood of improvement prior to tenure and/or promotion consideration.

As Department Chair, my signature indicates that this statement reflects my understanding of the collective views of the appropriate faculty of the department (as defined by the *Faculty Manual*) pertaining to the intensive review of this candidate, that these respective members had the opportunity to review this statement before it was shared with the candidate, and that I have met with the candidate to discuss this review.

DEPARTMENT CHAIR'S SIGNATURE	 DATE

DEPARTMENT CHAIR'S NAME (TYPED)

DEAN'S SIGNATURE*

DATE

*The Dean's signature indicates only that the Dean has reviewed this form. It does not necessarily indicate agreement with the conclusions.

CHANCELLOR'S SIGNATURE*

DATE