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Faculty Status Committee Request for Review

The Faculty Status Committee deals with disputes between faculty and administration and deals with appeals of tenure and promotion decisions on certain grounds. The primary responsibility of the Committee is spelled in Section I B 4. of the Faculty Manual.

The Faculty Status Committee is an independent investigative faculty committee that reports and makes recommendations directly to the president. Functions of the Faculty Status Committee are: reviews, mediates, and/or adjudicates disputes between individual faculty members and between individual faculty members and the administration.

Your Name:		Date:	
Title:		Phone Number:	
Status:	_ Tenured Faculty	Tenure Track Faculty	
	_ Career Track Facul	lty	
Other	(please specify)		
Department			
Complaint	Information		
Date of Inci	dent (if ongoing pleas	se provide a range):	
Using 1-2 s	entences, please des	cribe the complaint in plain language:	

Please identify the WSU Faculty Manual section which you believe was violated in your case (please cite using number of the section):

If there are others who have witnessed the incident, please provide their names and phone numbers/email below:

Is this the first time you have raised this concern?

____ Yes ____ No

Who has reviewed and/or acted on this complaint to date (please check the appropriate box)

Office	Reviewed	Acted
Department Chair or Director		
WSU Compliance and Civil Rights		
WSU Human Resource Services		
WSU Ombudsman		
WSU Faculty Affairs		

WSU Faculty Status Committee		
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Do you have any suggestions for resolving the complaint? If so, please explain.

Information submitted in this form should be directed to the FSC Chair/ Co-Chair for review. Please do not submit additional documents until they are requested by the FSC. You will receive an email confirmation of receipt of this form and information within it will be maintained in a confidential file accessible only by members of FSC. Your signature and receipt indicate understanding of the above.

Signature: _____

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Print Name: