

Voluntary Faculty Promotion Cover Sheet

Candidate Name (last, first middle initial)			
Primary School/College/Division		Primary Department/Program	
Secondary School/College/Division		Secondary Department/Program	
Tertiary School/College/Division		Tertiary Department/Program	
Appointment History			
Initial WSU Rank		Years in Rank	
Initial WSU			
Appointment Date Date of Promotion		Teaching Location	
(if applicable)			
Current Rank		Requested Promotion	
Documentation Checklist			
Provide the following documentation in the order listed below.			
1.	Voluntary Faculty Promotion Cover Sheet		
2.	Affiliate Chair Letter of Recommendation (if applicable)		
3.	WSU SOM Department Chair Letter of Recommendation		
4.	WSU SOM Department P&T Committee Letter of Recommendation (if applicable)		
5.	Curriculum Vitae (School of Medicine Format)		
6.	Teaching Grid		
7.	Personal Statement		
8.	Letters of Support (2 required of faculty at or above the rank sought)		
9.	Copy of Board Certification, if applicable, with numbers noted		
10.	Copy of Medical License, if applicable, with numbers noted		
11.	11. Miscellaneous (not to exceed 10 pages)		