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| **[Download the UNC Charlotte Logo](https://advancement.uncc.edu/sites/advancement.uncc.edu/files/media/logomark.zip)Date:** |  |

9201 University City Boulevard, Charlotte, NC 28223-0001

www.provost.uncc.edu

**RECOMMENDATION FOR SPECIAL FACULTY APPOINTMENT**

***Note:*** *This recommendation must be approved by the appropriate academic administrator before any offer of employment, either oral or in writing, is extended.*

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| --- | --- | --- | --- | --- |
| **College:** |  | | **Department** |  |
| **Position #** |  |  | | |

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| ***CANDIDATE RECOMMENDED*** |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Name of Candidate:** | |  | | |  | |  |
|  | | First | | | Middle I. | | Last |
| **Gender:** |  | | **Ethnicity:** |  | |  | |

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| ***NATURE OF APPOINTMENT*** |

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Rank/Title:** | | | Lecturer | | | | Other (Specify) | |  | | | |
| Special Terms: | | | |  | | | | | | | |
| Details: |  | | | | | | | | | | |
| Basis of Appointment: | | | | | 9 mos. | | 12 mos. | | | | |
| Annual Salary: | | | $ | | | Contract Period Beginning: | | |  | extending through: |  |

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| ***UNC CHARLOTTE FACULTY AND ADMINISTRATORS PARTICIPATING IN INTERVIEW*** |

|  |  |  |  |
| --- | --- | --- | --- |
| **1.** |  | **5.** |  |
| **2.** |  | **6.** |  |
| **3****.** |  | **7.** |  |
| **4.** |  | **8.** |  |

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| ***SELECTION SUMMARY AND JUSTIFICATION*** |

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| **A.** | In comparison to other candidates, comment on the nominee’s outstanding qualifications in terms of information received through the interview and selection process. Include in your justification why other interviewed candidates were not selected. |
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| **B.** | List all candidates interviewed (including the candidate recommended for appointment). For each candidate not selected, please provide non-selection reason(s). | |
|  |  |  |
|  | **Name** | **Reason for non-selection** |
| **1.** |  |  |
| **2.** |  |  |
| **3.** |  |  |
| **4.** |  |  |
| **5.** |  |  |
| **6.** |  |  |

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| **C.** | List candidates who declined an interview and/or withdrew during the search. Include reason, if available |
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| --- | --- |
| **D.** | Based on hiring negotiations include statement justifying the salary, and other items, offered to the selected candidate. \*\*See [hiring negotiations checklist](https://provost.uncc.edu/epa/sites/provost.uncc.edu.epa/files/media/hiring%20negotation%20checklist.docx)\*\* |
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| **E.** | If the nominee does not hold the appropriate terminal degree for the discipline, please attach an AA-21. |

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| ***COMPLETE APPLICANT FILE SHOULD INCLUDE THESE ATTACHMENTS*** |

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| --- | --- | --- | --- | --- | --- | --- |
| Form PD-7 | AA-02 | AA-04 | Vitae | Original Transcript | | AA-38 (CBC Disclosure Form) |
| AA-34 | AA-33 (only needed if search waived) | | | | EPA Profile (only if search was conducted) | |

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| ***CONCURRENT EMPLOYMENT OF RELATED PERSONS & CONFLICT OF INTEREST*** |

**Attach written management plan, if needed.**

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| By signing below we certify that University and UNC System policies related to Conflict of Interest (<http://legal.uncc.edu/policies/up-102.2>) and the Concurrent Employment of Related Persons (<http://legal.uncc.edu/policies/up-101.4>) have been thoroughly reviewed and reported by all parties at this pre-hire stage.  If needed, an appropriate written management plan is in place. This plan will be updated and reported annually. The plan will be maintained in the hiring department and the Academic Affairs Division office.  The management plan addresses on-going supervision of work and reporting responsibilities, financially-related expenses, wage or other compensation approvals, and performance reviews. |

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| ***SIGNATURES*** |

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| **Consultation with Assembled Faculty Committee** | | | | | | | | | | | | | | | | | |
| Date of Consultation: | | | |  | | Differing Opinion, Statement Attached: | | | | | | | | Yes | | No | |
| **COMMITTEE CHAIR:** | | | |  | | | | |  |  | | | | |  | |  |
|  | | | | *Signature* | | | | |  | *Typed name* | | | | |  | | *Date* |
|  | | | | | | | | | | | | | | | | | |
| **DEPARTMENT CHAIR:** | | | | |  | | | |  |  | | | | |  | |  |
|  | | | | *Signature* | | | | |  | *Typed name* | | | | |  | | *Date* |
|  |  | | |  | | | |  | | |  | |  | | | | |
| **DEAN:** | | |  | | | | | |  |  | | | | |  | |  |
|  | | | *Signature* | | | | | |  | *Typed name* | | | | |  | | *Date* |
|  | | | | Approved | | | Approved with modifications | | | | | Not Approved | | | | | |
| Comments: | |  | | | | | | | | | | | | | | | |