

NEW YORK INSTITUTE OF TECHNOLOGY
SCHOOL OF INTERDISCIPLINARY STUDIES & EDUCATION

REAPPOINTMENT REQUEST FORM

Adjunct Faculty:

Rank:

First Appointed in _____

Chair:

Chair's rating of teaching effectiveness 1 to 5 (1 not effective, 5 very effective)

1 2 3 4 5

Comments

Chair's Signature: _____ **date:** _____

SPC decision

- Reappoint**
- Not reappoint**
- Need more information**

Comments

SPC Chair's Signature: _____ **date:** _____

Dean's Signature: _____ **date:** _____