



## APPLICATION FOR TENURE

NAME \_\_\_\_\_ DATE \_\_\_\_\_

DEPARTMENT \_\_\_\_\_

COLLEGE \_\_\_\_\_

*( Faculty librarians indicate their most direct college affiliation,  
as agreed to with the Director of Library Services )*

DATE OF FIRST APPOINTMENT AT MARYWOOD UNIVERSITY \_\_\_\_\_

ACADEMIC RANK PRESENTLY HELD \_\_\_\_\_

DATE OF PROMOTION TO PRESENT ACADEMIC RANK \_\_\_\_\_

I wish to apply for tenure on the Marywood University faculty. In support of this request I submit the attached data.

*( In preparing the application, candidates for Tenure are reminded of the necessity  
to address each criterion in the sequential order established in the Tenure policy . )*

I am            am not            submitting separately packaged supplementary data.

\_\_\_\_\_  
Signature of Faculty Member

*( Date for submission of application: no later than October 15 )*