

**DOCUMENT INVENTORY FOR APPOINTMENT TO ACADEMIC TITLES  
APPROVED BY THE EVC/DEAN**

(Visiting Professor, Professor Recalled,  
Academic Administrator, Academic Coordinator, etc.)

Candidate Material to the Department \_\_\_\_\_  
Date to Division \_\_\_\_\_  
Date to Academic Human Resources \_\_\_\_\_

Department Completes

Name \_\_\_\_\_ Title \_\_\_\_\_

Division \_\_\_\_\_ Department/Unit \_\_\_\_\_

Annual Salary Rate \_\_\_\_\_ Basis (9 or 11 mo.) \_\_\_\_\_ % Time \_\_\_\_\_ Actual Salary \_\_\_\_\_

Effective: Pay Dates \_\_\_\_\_ Service Dates \_\_\_\_\_

Prior and/or Concurrent UC Employment: Yes \_\_\_\_\_ No \_\_\_\_\_; if yes, state location, dates, title(s):

**INDICATE WITH A  $\checkmark$  DOCUMENTS SUBMITTED. INCLUDE EXPLANATION IN DEPARTMENT/UNIT LETTER IF ANY DOCUMENTS ARE NOT SUBMITTED. SUBMIT DOSSIER IN FOLLOWING ORDER:**

\_\_\_ Affirmative Action Compliance: (Compliance or waiver must be issued before appointment may be offered)  
Search # \_\_\_\_\_ Compliance dated \_\_\_\_\_ or waiver dated \_\_\_\_\_

\_\_\_ Dean's Letter (if EVC authority)

\_\_\_ Department/Unit Letter

\_\_\_ Extramural Letters (usually three)

Sample copy of solicitation letter

List of those who might not objectively evaluate Candidate and Candidate's reasons (optional)

List of all persons from whom letters were sought; identify those suggested by candidate

List of any persons declining to write; include any declining letters in the file

Brief comments on academic standing of each letter writer and relationship, if any, to Candidate; identify letter-writers with alpha code.

**OR** Explanation in Department/Unit letter of how letters were obtained (e.g. Candidate solicited, unsolicited)

\_\_\_ Any record of discussion with the Candidate concerning role, rank, salary, facilities, support (may be included in Department letter)

\_\_\_ Candidate's Optional Statement

\_\_\_ Biography Form (1501) completed and signed by Candidate

\_\_\_ Student Evaluations (if appropriate)

\_\_\_ Candidate's address for correspondence:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**(I-9 Form must be completed within 3 days of beginning service or employment will be terminated.)**

- ORIGINAL DOSSIER FOR APPROVING AUTHORITY (Add PAF and employment forms if EVC authority)
- ONE COPY OF DOSSIER FOR DIVISION (If EVC authority)
- ONE COPY OF DOSSIER TO BE RETAINED BY DEPARTMENT