AAPPS 04.02.10

**TRACKING FORM**

**Dismissal**

**I. Faculty Member**

 Name:

Department:

College:

**II. ACTION –**

 1. Departmental Personnel Committee

Recommendation for Dismissal

Yes: [ ]  No: [ ]  Abstain: [ ]

(Enter Voting Results)

List of Voting Faculty:

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Personnel Committee Recorder Date

1. Recommendation of the Department Chair/School Director

I Concur with Recommendation specified above by the Departmental Personnel Committee.

Yes: [ ]  No: [ ]

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Department Chair/School Director Date

AAPPS 04.02.10

3. Recommendation of the College Dean

I Concur with Recommendation specified above by the Departmental Personnel Committee and Department Chair/School Director.

Yes: [ ]  No: [ ]

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 College Dean Date

4. Recommendation of the Provost/VPAA

I Concur with the Recommendation specified above by the Departmental Personnel Committee, Department Chair/School Director and College Dean.

Yes: [ ]  No: [ ]

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Provost/VPAA Date