

OLD DOMINION UNIVERSITY
AUTHORIZATION FOR SECURING NEW FACULTY

(To be sent to the Office of Institutional Equity and Diversity)

Please prepare a contract for the person and position described below:

1. Name and Address:

2. Rank:

3. Department:

4. College:

5. Salary:

6. Contract Period:

7. Number of Months:

8. Type of Contract:

9. If rank is that of Instructor, select one of the following:

10. Indicate appropriate footnote, if any:
 Based on an annual salary of \$_____for _____months.

 Rank will be that of Assistant Professor if all requirements for the degree are completed by _____

 Rank will be that of _____if all requirements for the degree are completed by _____

 Salary includes a stipend of \$_____for serving as _____

- 11a. Is this person a U. S. citizen? Yes_____ No_____

If the answer is no, what is his/her visa or immigration status?

11b. Is there additional information about the immigration status of this individual which we should be aware of and call to the attention of the International Student/Faculty Advisor?

12. Is there any other information about this individual that needs to be taken into account when preparing their contract?

13. Social Security Number:

14. Date of Birth:

15. Faculty Position Number:

Please attach copies of the following documents:

The candidate's vitae

The Affirmative Action Selection Report (Form 9)

Recommendation for Reduction in Probationary Period (Tenure-track Faculty only)

I certify that I have checked with the appropriate department chairman and the following steps have been taken in connection with this position:

- Advertising sent to the Provost/Vice President for Academic Affairs
- Submission of Interview Selection Form to the
Office of Institutional Equity and Diversity
- Interview conducted in accordance with Procedures
for Appointment of New Faculty in current Faculty
Handbook.

I hereby (1) certify that this person meets the requirements of the University and Commonwealth for the particular rank requested and that funds are available for the salary indicated and (2) authorize a contract to be prepared and mailed.

PROVOST _____

DEAN _____

DATE _____

*****Do Not Write Below This Line*****

Position Number Assigned _____

APPROVED _____

DATE _____