



## APPLICATION FOR ADJOINT FACULTY FOR GRADUATE FACULTY MEMBERSHIP

### APPLICANT

\_\_\_\_\_ *Full Name*

\_\_\_\_\_ *Requesting Department*

\_\_\_\_\_ *Requesting College*

Status:  Initial Appointment as a Special Member to the Graduate Faculty

Reappointment as a Special Member to the Graduate Faculty

Date of initial appointment: \_\_\_\_\_

### CURRICULUM VITA

*\*Please attach a copy of a current Curriculum Vita.*

\_\_\_\_\_ *Current Non-UTSA Position/Title (if applicable)*

\_\_\_\_\_ *Current Non-UTSA Affiliation/Employer (if applicable)*

a) Highest Degree Earned: \_\_\_\_\_

b) When and Where Obtained: \_\_\_\_\_

c) Area of Specialization: \_\_\_\_\_

d) Does the applicant hold a terminal degree in the field of this application?  Yes  No Explanation of the applicant's qualification for this special membership if the applicant does not currently possess a terminal degree in the field of this application:

### SIGNATURES & RECOMMENDATIONS

\_\_\_\_\_ Number of Department Graduate Program Committee members

\_\_\_\_\_ Vote (for/against)

\_\_\_\_\_ Date of Vote

\_\_\_\_\_ *Graduate Program Chair, Signature*

\_\_\_\_\_ *Print Name*

\_\_\_\_\_ *Date*

Approve  Disapprove

\_\_\_\_\_ *Department Chair, Signature*

\_\_\_\_\_ *Print Name*

\_\_\_\_\_ *Date*

Approve  Disapprove

\_\_\_\_\_ *Associate Dean, Signature*

\_\_\_\_\_ *Print Name*

\_\_\_\_\_ *Date*

Approve  Disapprove