

Request For Consideration Early Permanent Appointment

Date

To: President

In accordance with the provisions of the Policies of the SUNY Board of Trustees, I hereby request your consideration of my candidacy of early permanent appointment.

Pertinent information:

Name	Official State Title	SL Rank
Initial Appointment Date to Full Time	Start Date of Current Title	
Consecutive Years of Professional Service		
Department	Immediate Supervisor	
Current Appointment Type	Current Appointment Ending Date	
	for consideration, a recommendations package or your review. Furthermore, if permanent app e on my anniversary.	

If my application for your review is denied, I understand that I may make application for permanent appointment during subsequent years of professional service. I understand that if the permanent appointment review process is conducted and permanent appointment is not granted, my employment with the university will cease at the end of my current term or probationary appointment.

Very truly yours,

Employee Signature

cc:

Immediate Supervisor

Intermediate Supervisor

Rev. Date 4/2016