Academic Personnel Policy Exception Summary Form

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| Section I: Candidate Information (to be completed by department AP contact) |
| LAST NAME, First Name, MI: |  |
| Department: |  |
| Rank/Title/Step: |  |
| Salary: |  | Next Review Due: |  |
| Hire Date: |  | Clock Ends: |  |

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| Section II: Exception Requested (to be completed by department AP contact) |
| Policy citation: |  |
| Brief description of exception requested: |

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| Section III: Background and Analysis (to be completed by APS) |
| Background: |
| Policy Reference: |
| Notes: |
| Precedent: |

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| Section IV: Recommendations (to be completed by APS) |
| Recommendation: |

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| OUTCOME | APPROVE | DISAPPROVE |
| Department: |  |  |
| Dean: |  |  |
| EVC: |  |  |