Academic Personnel Policy Exception Summary Form

Section I: Candidate Information (to be completed by department AP contact)				
LAST NAME, First Name, MI:	MI:			
Department:				
Rank/Title/Step:				
Salary:	Next Review D	Due:		
Hire Date:	Clock Ends:			
Section II: Exception Requested (to be completed by department AP contact)				
Policy citation:				
Brief description of exception requested:				
Section III: Background and Analysis (to be completed by APS)				
Background:				
Delian Deferences				
Policy Reference:				

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

OUTCOME	APPROVE	DISAPPROVE
Department:		
Dean:		
EVC:		