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**FACULTY PROMOTION INITIAL DATA FORM**

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| Please complete this form when requesting a Promotions Folder in Box.  |
| Please send the completed form to the Promotions Committee Chair, Dr. Meira Orentlicher, by email promotions@touro.edu. |

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| --- | --- |
| **DATE** |  |
| **NAME** |  |
| **TOURO ID#** |  |
| **PROGRAM/DEPARTMENT** |  |
| **SCHOOL** |  |
| **DEAN(S) TO WHOM YOU REPORT** |  |
| **CHAIR(S) TO WHOM YOU REPORT** |  |
| **DIRECTOR(S) TO WHOM YOU REPORT** |  |
| **TELEPHONE**  |  |
| **TOURO EMAIL** |  |

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| **Candidate for Promotion** |
| **From (Rank)** | **To (Rank)** |
|  |  |
| **Dates of previous application for promotion (if any)** |  |

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| **Record at Touro University** |
| **Dates at Each Rank** | **Rank** | **School and Department** |
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| **College/University Education and/or Education in Progress** |
| **Date** | **Institution** | **Degree** | **Major** |
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**Teaching Experience in Other Institutions**

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| **Full-time (List Dates at Each Institution and Rank)** |
| **Date** | **Institution** | **Department** | **Rank** |
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# **Areas of Expertise and References**

Samples of your scholarship will be shared with an expert in your field/area of expertise who will provide an objective review of your work. To help identify the objective reviewer, please list your area(s) of expertise and recommend 3-5 full professors/scholars, outside of Touro University, who may be contacted **by the committee chair** to objectively evaluate your scholarship. These scholars should not know you personally or have worked with you on collaborative projects and should be solicited by or approved by the committee chair. These are in addition to those from whom you will be requesting your own letters of reference.

Please list your area(s) of expertise:

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Please list experts in your field who may be contacted **by the committee chair:**

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| --- | --- | --- | --- |
| **NAME** | **POSITION** | **PHONE & EMAIL** | **RELATIONSHIP TO YOU** |
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