

**APPENDIX B1**  
**2024-25 Recommendations**  
**Probationary to Tenured**

Candidate Name: \_\_\_\_\_ Candidate Email: \_\_\_\_\_

Campus Mailing Address: \_\_\_\_\_  
 \_\_\_\_\_

College/Campus Name: \_\_\_\_\_ Unit Name: \_\_\_\_\_

Unit Chair/Head Name: \_\_\_\_\_ Unit Chair/Head Email: \_\_\_\_\_

UMN Faculty Appointment Information

**Previous Appointment**

Rank: \_\_\_\_\_ Appointment Type: \_\_\_\_\_

Effective Date: \_\_\_\_\_

**Current Appointment**

Rank: \_\_\_\_\_ Appointment Type: \_\_\_\_\_

Effective Date: \_\_\_\_\_

Time in rank at other institutions (if applicable): \_\_\_\_\_ years

Total years in rank (including current year): \_\_\_\_\_ years

**Proposed Appointment**

Rank: \_\_\_\_\_ Appointment Type: \_\_\_\_\_

Voting Information (Fill in total numbers for Unit and College/Campus votes in each category)

	Unit Vote	College Vote	Chair/Head Recommendation	Dean/Chancellor Recommendation
Yes			<input type="checkbox"/>	<input type="checkbox"/>
No			<input type="checkbox"/>	<input type="checkbox"/>
Abstain			N/A	N/A
Not voting			N/A	N/A

Notes: