The University of Tennessee at Martin

Graduate Faculty Application – Full Membership (Please type)

Name:	Signature:	Date:
Department:		Rank:
Highest Degree:	Institution:	
List years full-time college teaching	at a regionally accredited institut	on:
List disciplines in which you have m	inimum of 18 graduate semester	hours:
List disciplines you will teach at UT	Martin:	
Membership Category Request	ted (Check either initial or renew	al for membership category requested)
Initial Full Membership		Renewal of Full Membership
Initial		Renewal
5 years beginning	Term, 20	5 years beginning Term, 20
Qualifications:		Qualifications:
 Regular faculty status Terminal degree in the teaching field 3 years full-time teaching experience at college level at a regionally accredited institution Satisfactory teaching, research, or creative experience (minimum of 4 activities as identified on review check sheet since completion of terminal degree) Recommended after consultation with departmental faculty 		Has demonstrated continuing scholarly activity as recognized/commended by peers in applicant's field (minimum of 4 activities as identified on review check sheet in last five years)
Graduate Courses and/or Assignment List graduate courses taught and/		ast approved period or type NONE:
Recommendations and Approval-	—Your signature denotes your	support of this application.
	Departmental Committee	Date
	Chair	Date
	Coordinator (if applicable)	Date
	Dean of College	 Date
Submit the completed original application		
Approved effective:		Expiration date:
Denied		
Rev 09/11	Graduate Council Chair	Date