

Marquette University Faculty

**RECOMMENDATION FOR APPOINTMENT**

Candidate Name (Title): \_\_\_\_\_ New Hire Reappointment Courtesy

School/College: \_\_\_\_\_ Recommended Rank: \_\_\_\_\_

Department: \_\_\_\_\_ Effective date of Appointment: \_\_\_\_\_

Status and Salary: Full-Time Recommended Salary: \$ \_\_\_\_\_ on \_\_\_\_\_ (9) or (12) month basis  
Part-Time Recommended Salary: \$ \_\_\_\_\_ for \_\_\_\_\_ # of credits  
OR \$ \_\_\_\_\_ for \_\_\_\_\_ # hours per week \_\_\_\_\_ month basis

Source of salary funds: \_\_\_\_\_

Are **moving expenses** recommended?

No \_\_\_\_\_ Yes up to \$ \_\_\_\_\_ Account Number ----- \_\_\_\_\_

If **start-up expenses** are recommended, please provide an attachment detailing the dollar amount, annual distribution, account number and justification.

Department Chair

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Recommendation: \_\_\_\_\_

Dean

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Recommendation: \_\_\_\_\_

Vice Provost for Research/Graduate School Dean (if research, grant funding or graduate teaching implications)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Office of the Provost

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Timebound Date: \_\_\_\_\_

(Initial) or NA

Third Year Review Date: \_\_\_\_\_

(Initial)