**Graduate Faculty Application**

**for Full Graduate Faculty Status**

Date of Application: **Click or tap to enter a date**

Application Type: [ ]  **Initial** [ ]  **Renewal**

* + - 1. **General Information**

College: **Select College Name**

Department: **Select Department Name**

Faculty Member (Legal Name): [Category]

Faculty Member Email:

Total Years at VSU:

Present Rank: Select rank

Years in Present Rank:

**Education** (list highest degree in field)*(adjust text box as needed)*

|  |  |  |
| --- | --- | --- |
| **Institution** | **Major** | **Year Degree Awarded** |

**Memberships and offices held in professional associations:** (most recent 5-year period)*(adjust text box as needed)*

|  |  |  |
| --- | --- | --- |
| **Association Name** | **Office Held/Member** | **Year of Initial Membership** |

**Administrative Appointments at VSU related to graduate program**: *(adjust box as needed)*

|  |  |
| --- | --- |
| **Description** | **Dates of Service** |

**Awards, honors, or special recognitions earned related to work toward graduate programs** (most recent 5-year period):*(adjust box as needed)*

|  |  |  |
| --- | --- | --- |
| **Title** | **Date(s)** | **Description** |

* + - 1. **Graduate Teaching, Advising, and Mentoring** (most recent 5-year period)

**Scheduled Teaching**

Export and attach a Scheduled Teaching report from the Success Portal covering the most recent five years:

1. Access the Success Portal through MyVSU or directly at <https://successportal.valdosta.edu/>
2. Select  from the top menu >> then **Scheduled Teaching**
3. For “Term Start” select **five years prior**; for “Term End” select the **current term**.
4. Select 
5. Select 
6. Select 
7. Download as PDF or RTF.
8. Depending on your web browser’s settings, the file may open immediately or download. Save the report to your computer or OneDrive.

**Guided independent studies, internships, or other teaching responsibilities contributing to graduate education**: (most recent 5-year period) *(adjust box as needed)*

|  |  |  |
| --- | --- | --- |
| **Title or Student Name** | **Dates** | **Description** |

**Thesis/Dissertation committee service:** (most recent 5-year period) *(adjust box as needed)*

|  |  |  |  |
| --- | --- | --- | --- |
| **Title or Student Name** | **Dates of Service** | **Term Student Graduated)** | **Chair, Member, or Other** |

**Advising & Mentoring** (current year):

|  |  |  |
| --- | --- | --- |
|  | **Advisees** | **Mentees** |
| Number of Undergraduate in Accelerated Program |  |  |
| Number of Graduate |  |  |

1. **Evaluation of Graduate Teaching, Advising, and Mentoring** (most recent 5-year period)

**Teaching performance in graduate courses as evaluated by candidate, department head, and students** (2-3 paragraphs). Evaluate your teaching performance during the most recent 5-year period in graduate level courses. Summarize performance evaluations provided by your department head during the most recent 5-year period. If peer evaluations are used in your department, you may include them. Summarize and evaluate what you have learned about your teaching effectiveness through reading your Student Opinions of Instruction (SOI). *(adjust box as needed)*

**Self-Evaluation of graduate student advising and mentoring** (2-3 paragraphs). *(adjust box as needed)*

1. **Research, Scholarship, Professional Growth, and Creative Production**

**Publications, Performances, Exhibitions, and/or Creative Research:**

List publications, performances, exhibitions, and/or creative research *(adjust box as needed)*

|  |  |  |  |
| --- | --- | --- | --- |
| **Title** | **Date** | **Journal Name or Activity Location** | **Contributor(s)** |

**Research/Scholarship and/or Creative/Artistic Work in Progress:** *(adjust box as needed)*

|  |  |  |
| --- | --- | --- |
| **Title** | **Anticipated Completion, Submission, or Performance Date** | **Contributor(s)** |

**Other research completed during the past 5 years not reported above:** *(adjust box as needed)*

|  |  |  |
| --- | --- | --- |
| **Title** | **Date** | **Contributor(s)** |

**Professional presentations:** (most recent 5-year period)*(adjust box as needed)*

|  |  |  |
| --- | --- | --- |
| **Professional Association** | **Nature of Contribution** | **Date** |

**Applications for university and external funding:** (most recent 5-year period)*(adjust box as needed)*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Title & Investigators** | **Funding Agency** | **Amount Requested/Received** | **Status** *(Under Review, Funded, Not Funded)* | **Start Date & End Date of Award** |

**Meetings of professional associations attended:** (most recent 5-year period) *(adjust box as needed)*

|  |  |  |  |
| --- | --- | --- | --- |
|  **Professional Association** | **Location** | **Date(s)** | **Important Sessions Attended** |

**Professional training sessions/workshops attended, including professional practice activities:** *(adjust box as needed)*

|  |  |  |
| --- | --- | --- |
| **Professional Development Activity** | **Date(s)** | **Topics Covered** |

**Paid or unpaid consultancies, workshops, and professional development activities provided:** *(adjust box as needed)*

|  |  |  |
| --- | --- | --- |
| **Title** | **Date(s)** | **Description** |

**Reassigned Time:**

|  |  |  |
| --- | --- | --- |
| **Reason***(scholarship, administrative, etc.)* | **Term & Year** | **Description/Title of Work** |

1. **Graduate Service to the University, Community, or Profession**

**Department, College, University, and University System of Georgia Activities**: *(adjust box as needed)*

|  |  |  |  |
| --- | --- | --- | --- |
| **Committee Name** | **Nature of Service** *(chair/member)* | **Notable Accomplishments** | **Dates of Service***(year appointed)* |

**Regional, Public, and Professional Service Activities**: *(add/adjust rows as needed)*

|  |  |  |  |
| --- | --- | --- | --- |
| **Committee/Organization Name** | **Nature of Service** *(chair/member)* | **Notable Accomplishments** | **Dates of Service***(year appointed)* |

*\*Leadership roles in community organizations, participation in community service activities in ways that related to your professional skills, consulting, continuing education activities, etc., not just membership.*

1. **Approvals**

|  |
| --- |
|  |
|  | **Signature** | **Date** | **Evaluation** |
| Applicant |  |  |  |
| Department Head |  |  | \_\_\_ Recommended\_\_\_ Not Recommended |
| College Dean |  |  | \_\_\_ Recommended\_\_\_ Not Recommended |
| Graduate Faculty Membership Committee |  |  | \_\_\_ Recommended\_\_\_ Not Recommended |
| Associate Provost for Research and Graduate Studies |  |  | \_\_\_ Approved\_\_\_ Denied |
|  |

|  |  |
| --- | --- |
| **Submission Instructions for Applicants** | Submit via DocuSign ([instructions](https://www.valdosta.edu/administration/it/about/documents/docusign-upload.pdf)). Upload two files (completed application AND Scheduled Teaching report from the Success Portal) and route as follows:1st recipient: Applicant (for signature)2nd recipient: Department Head (for signature)3rd recipient: Dean (for signature)4th recipient: Ms. Darli Devane (djdevane) (for CC: receives a copy)\*If you are unable to send via DocuSign, email the fully signed application and scheduled teaching report to djdevane@valdosta.edu |