

# Renewal for Graduate Faculty Adjunct Status

Office of Graduate Studies | University of Nebraska-Lincoln



## INSTRUCTIONS

This form is to be used at UNL by the Graduate Committee Chair in recommending, on behalf of the Graduate Committee, renewal of previously approved Adjunct Graduate Faculty status for adjunct faculty member(s) or for initial appointment of previously employed UNL Graduate Faculty.

**Adjunct Graduate Faculty Policies**

Upon recommendation of the departmental/school or interdepartmental Graduate Committee, Adjunct Faculty previously holding Graduate Faculty status while employed by the University of Nebraska, may retain certain rights and privileges intended to aid in successful degree completion of University of Nebraska students previously under their formal mentorship. Adjunct Faculty, not previously employed by the University of Nebraska or former employees no longer holding Graduate Faculty status, must be considered for Graduate Faculty status. a. Adjunct Faculty with Graduate Faculty status may teach graduate courses, serve as members of graduate programs, and co-chair the supervisory committees of doctoral students with a resident Graduate Faculty member. Adjunct Faculty have no campus wide or Graduate College voting privileges outside their supervisory committee work. b. All Adjunct faculty with Graduate Faculty status must be reappointed to the Graduate Faculty every four years by the departmental/school Graduate Committee and approved by the departmental/school Chair or Head and by the respective campus Dean for Graduate Studies. c. Any compensation decision continues to reside with the department/school

For further information see <https://nebraska.edu/-/media/unca/docs/offices-and-policies/policies/policies/graduate-college-policy-handbook.pdf>

## NOMINEE

Name of Nominee	Personnel Number	Category	Rank	Outcome of Vote of the Graduate Committee
				Affirmative Votes: _____ Opposing Votes: _____ Total Number Of Votes: _____

Campus Mailing Address  Campus:

Nominee's Resume  *Required: Check this box to indicate that you have attached the nominee's professional resume.*

## NOMINATION

Nominating Department:

Dept. Mailing Address  Campus

We request Associate status for a period of  years (four years maximum).

This request has the approval of the majority of the Departmental or Interdepartmental Area Graduate Committee:

Signature, Graduate Committee Chair:  Date:

Signature, Department Chair:  Date:

## GRADUATE STUDIES APPROVAL

Request approved until

Signature, Graduate Studies:  Date:

To submit form please use our Document Submission Portal: <https://www.unl.edu/gradstudies/graduate-studies-document-submission>