Candidate for promotion in research rank to: ____________________________________________

1. Name: ________________________________________________________________
   Department: __________________________________________________________
   College/Institute: ______________________________________________________
2. Present research rank:
   Years of service in present rank at Virginia Tech as of May 2020: ________________
   Number of years at same or higher rank elsewhere: ____________________________
3. Highest degree earned: __________________________ Date awarded: ______________
   Institution: _____________________________________________________________
4. Number of years experience in full-time professional-level employment as of May 2020:
   In higher ed: _______ In other employment: _________________________________
   Departmental committee recommends approval.
   Departmental committee does not recommend approval.
   Committee vote: ______ approve ______ not approve ______ abstain
   Departmental committee chair’s signature __________________________ Date __________

5. Number of years employed at Virginia Tech as of May 2020: __________________
   Date of initial Virginia Tech faculty contract: _________________________________
6. Percent of assignment to university teaching/research (208):
   Percent of assignment to Sponsored Research: _______________________________
   Percent of assignment to Experiment Station (229): ___________________________
   Percent of assignment to Cooperative Extension (229): _________________________
   Department head or institute director recommends approval.
   Department head or institute director does not recommend approval.
   Department head or institute director’s signature __________________________ Date __________

7. ☐ Departmental committee recommends approval.
   ☐ Departmental committee does not recommend approval.
   Committee vote: ______ approve ______ not approve ______ abstain
   Departmental committee chair’s signature __________________________ Date __________

8. ☐ Department head or institute director recommends approval.
   ☐ Department head or institute director does not recommend approval.
   Department head or institute director’s signature __________________________ Date __________

9. ☐ College committee recommends approval (as appropriate).
   ☐ College committee does not recommend approval (as appropriate).
   Committee vote: ______ approve ______ not approve ______ abstain ______ ineligible
   College committee chair’s signature __________________________ Date __________
10. ☐ Dean or senior manager recommends approval.
    ☐ Dean or senior manager does not recommend approval.

    Dean or senior manager’s signature……………………………………….. Date

11. ☐ Vice President for Research and Innovation recommends approval.
    ☐ Vice President for Research and Innovation does not recommend approval.

    VP for Research and Innovation’s signature…………………………… Date

12. ☐ Executive Vice President and Provost recommends approval.
    ☐ Executive Vice President and Provost does not recommend approval.

    Executive Vice President and Provost’s signature……………………….. Date