

Contract Request: NEW Tenure-track Full-time Faculty

PART A: POSITION/PERSONAL INFO (to be completed by office personnel)

SCHOOL : _____ DEPARTMENT: _____

Date Contract Becomes Effective: _____

Full-time: One Semester _____ One Year _____

Type of appointment: Continuing: _____ Non-Continuing: _____

Name: _____

Address: _____

Home Phone: _____ Office phone: _____

PART B: CONTRACT TERMS (to be completed by Dean) ***CONFIDENTIAL *******

Salary: _____ Rank: _____

Years Credit for Teaching External to Siena: _____

Years Credit for Teaching at Siena (Visiting): _____

Expected Tenure Review Date (Sem/Year) _____

Startup Allowance, if any: _____ Moving Allowance, if any (see chart): _____

Dean's Signature: _____ Date: _____

VPAA Initial: _____ Date of verbal acceptance by faculty member: _____

PART C: CONTRACT REQUEST (to be completed by Academic Affairs)

SID # Assigned _____

Position is: New _____ Replacing (if applicable): _____ Reason _____

Degree confirmed _____ Institution _____ Year _____ Initial _____

Entered in Banner: _____ Entered in Database: _____ CV/Approvals attached: _____

Contract Authorized/Requested by: _____

Date Sent to Human Resources: _____