

APPLICATION FOR DSI – REVIEW SHEET
FULL-TIME FACULTY (tenured, tenure-track, lecturer)
Reporting Period: January 1 – December 31, 2023

Name of faculty member: _____ Department _____

This is a consolidated cover sheet reflecting discretionary award recommendations from the department subcommittee (or committee of the whole), department chair, and the dean.

After review/rationale is completed, type name and date, submit to next level.

Department Subcommittee Recommendation:

Major

Merit

No Award

Rationale:

Submitted by:

Subcommittee Chair - Printed Name

Date:

Department Chair Recommendation:

Major

Merit

No Award

Rationale:

Submitted by:

Department Chair - Printed Name

Date:

Dean Recommendation:

Major

Merit

No Award

Rationale:

Submitted by:

Dean - Printed Name

Date:

Salary & Increase Committee Recommendation:

Major

Merit

No Award

Rationale:

Submitted by:

Salary & Increase Committee Chair - Printed Name

Date:

APPLICATION FOR DSI – CHECKLIST

FULL-TIME FACULTY (tenured, tenure-track, lecturer)
Reporting Period: January 1 – December 31, 2023

Name of faculty member:

Department:

To be completed by the candidate:

Following is an outline of the required documentation, in the exact order in which it should appear in the file.

Included (✓)?

(Indicate only one ✓ per row)

Yes No

- | | | |
|-----|-----|--|
| ___ | ___ | 1. Review/Cover sheet (<i>included with call letter</i>) |
| ___ | ___ | 2. This checklist (<i>included with call letter</i>) |
| ___ | ___ | 3. Brief list outlining accomplishments |
| ___ | ___ | 4. Annual Faculty Reports for January 1 through December 31, 2023 <u>and</u> 2022 |
| ___ | ___ | 5. Current curriculum vitae in SUNY New Paltz format (see 2023 DSI guidelines) |