APPLICATION FOR DSI – REVIEW SHEET

PART-TIME FACULTY

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: Date:

Subcommittee Chair - Printed Name

Department Chair Recommendation: ☐**Major**   ☐ **Merit**   ☐ **No Award**

Rationale:

Submitted by: Date:

Department Chair - Printed Name

Dean Recommendation: ☐ **Major**   ☐ **Merit**   ☐ **No Award**

Rationale:

Submitted by: Date:

Dean - Printed Name

APPLICATION FOR DSI – <u>CHECKLIST</u>

PART-TIME FACULTY
Reporting Period: January 1 – December 31, 2023

Name of faculty member:

Department:

<u>To be completed by the candidate</u>:

Following is an **outline of the required documentation, in the <u>exact order</u> in which it should appear in the file.**

Included (✓)?
(Indicate only one ✓ per row)

<u>Yes</u>   <u>No</u>

____ ____ 1. **Review/Cover sheet** (included with call letter)

____ ____ 2. **This checklist** (included with call letter)

____ ____ 3. **Current curriculum vitae** in SUNY New Paltz format (see 2023 DSI guidelines)

____ ____ 4. **Brief list outlining accomplishments** (no more than 3 pages)

____ ____ 5. **List of courses, etc.** (see 2023 DSI guidelines)

____ ____ 6. **Syllabi for courses in #5** (see 2023 DSI guidelines)