



PERSONNEL ACTION — ACADEMIC EMPLOYEE

Part A: To be completed by the Academic Employee

1. Name \_\_\_\_\_

2. Title \_\_\_\_\_ Highest Degree Earned \_\_\_\_\_

3. Department \_\_\_\_\_

4. Professional obligation: (check one)
[ ] Calendar year [ ] Academic year

5. Date of initial appointment to campus: \_\_\_\_\_

6. Number of years of applicable service through the end of the current contract
a) at SUNY Potsdam \_\_\_\_\_ b) Credited prior service \_\_\_\_\_ c) Total service \_\_\_\_\_

7. Action requested: (Check all that apply and complete as required)

[ ] Reappointment for \_\_\_\_\_ year(s)

[ ] Continuing appointment with an effective date of \_\_\_\_\_

[ ] Chairperson reappointment for \_\_\_\_\_ year(s)

[ ] Promotion and/or salary increase from \_\_\_\_\_ to \_\_\_\_\_

[ ] Sabbatical leave: [ ] a) half year/full salary [ ] b) full year/half salary

Dates of requested leave from \_\_\_\_\_ to \_\_\_\_\_

[ ] Leave without salary [ ] other leave

Dates of requested leave from \_\_\_\_\_ to \_\_\_\_\_

8. NOTE:a) For reappointment, continuing appointment, and promotion an ACADEMIC FACULTY INFORMATION FORM and updated vita must be attached.

b) For a leave request instructions are provided on page 2.

9. \_\_\_\_\_
Signature of Academic Employee

\_\_\_\_\_
Date

## INSTRUCTIONS FOR LEAVE REQUEST

## A. Sabbatical and other leaves with salary

Requests for sabbatical and other leaves with salary will be reviewed in accordance with the *Policies of the Board of Trustees* and the approved campus personnel policy statement.

1. *Applicant*

Attach a statement discussing the following points:

- a) the purpose and the objectives of the leave and how these will be met
- b) the preplanning involved in the proposed project
- c) the benefits to you, the department and the College if the leave is granted
- d) fellowships, grants-in-aid, or earned income you expect to receive during the period of leave
- e) the names of outside sources from whom you have tried to obtain funding for the project
- f) how the work of your leave will be evaluated in terms of the objectives listed

2. *Department Chair*

Attach a statement discussing the following points:

- a) an appraisal of the purpose, objectives and benefits of the leave as given by the applicant
- b) the manner in which the duties of the applicant will be covered should the leave be granted
- c) an appraisal of the evaluation process proposed
- d) your recommendation

## B. Leave without salary

1. *Applicant*

Attach a statement giving the following information:

- a) the purpose and the objectives of the leave and any benefits to you, the department and the College should the leave be granted

2. *Department Chair*

Attach a statement discussing the following:

- a) an appraisal of the purpose, objectives and benefits of the leave granted by the applicant
- b) the manner in which the duties of the applicant will be covered should the leave be granted
- c) your recommendation

Part B:

10. Action of the Personnel Committee of the Department or School (include evidence of teaching ability, scholarly competence, relations with students, service to colleagues, research activity, other University service, etc.) Attach additional pages if necessary. With respect to written recommendations pertaining to reappointment, a copy of the recommendation shall be sent to the employee at the time it is prepared.

\_\_\_\_\_  
Signature of Personnel Committee Chair

\_\_\_\_\_  
Date

11. Recommendation of Department Chair. Attach additional pages as necessary. With respect to written recommendations pertaining to reappointment, a copy of the recommendation shall be sent to the employee at the time it is prepared.

Comments:

\_\_\_\_\_  
Signature of Department Chair

\_\_\_\_\_  
Date

12. *Recommendation of Dean.* Attach additional pages as necessary. With respect to written recommendations pertaining to reappointment, a copy of the recommendation shall be sent to the employee at the time it is prepared.

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If recommending continuing appointment provide effective date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Dean

\_\_\_\_\_  
Date

13. *Recommendation of Vice President/Provost.* Attach additional pages as necessary. With respect to written recommendations pertaining to reappointment, a copy of the recommendation shall be sent to the employee at the time it is prepared.

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Vice President/Provost

\_\_\_\_\_  
Date

NOTE: When the appraisal is in consideration for reappointment, continuing appointment, or promotion, the appraisal file shall be forwarded to the Office of Human Resources BEFORE the decision of the President is made, in order that the academic employee being evaluated may have the opportunity to examine the appraisal file and file a statement in response to any item contained therein.

14. *Decision of the President*

I Concur with the recommendation of the Vice President/Provost

I do NOT Concur with the recommendation of the Vice President/Provost

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
President Kristin G. Esterberg, Ph.D.

\_\_\_\_\_  
Date