

1. Department Chairperson's Endorsement:
(Attach typed narrative stating your support or non-support of this request. This narrative should be copied to the faculty member.)

I endorse this request.
 I do not endorse this request.

Date

Signature

2. Dean's Endorsement:
(Attach typed narrative stating your support or non-support of this request. This narrative should be copied to the faculty member.)

I endorse this request.
 I do not endorse this request.

Date

Signature

3. Faculty Affairs' Committee Endorsement:
(Attach typed narrative stating your support or non-support of this request. This narrative should be copied to the faculty member.)

I endorse this request.
 I do not endorse this request.

Date

Signature

4. Provost/VPAA Endorsement:
(Attach typed narrative stating your support or non-support of this request. This narrative should be copied to the faculty member.)

I endorse this request.
 I do not endorse this request.

Date

Signature
