**Request to Establish New Faculty Position or Fill Vacant Position**

**College of Health Professions**

Instructions: This form is used to request approval to establish a new, permanent (non-adjunct) faculty position or to fill a faculty position that has been vacated. Authorization from the dean is necessary before recruiting or advertising faculty positions.

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| --- | --- |
| Date of Request |  |
| Department |  |
| Program |  |

Is this a request to establish a new faculty position or to fill an existing faculty position that is vacant (or anticipated to be vacant)? Type X in one box.

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| --- | --- | --- | --- |
|  | New faculty position |  | |
|  | Fill a vacant, existing faculty position | Existing employee position number |  |

What term is requested for this position? Type X in one box.

|  |  |
| --- | --- |
|  | 12-month appointment |
|  | 10-month appointment |
|  | 9-month appointment |

What type of appointment is requested for this position? Type X in one box.

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| --- | --- |
|  | Regular faculty (teaching, research, and service) |
|  | Clinical faculty (primarily clinical practice) |
|  | Research faculty (primarily research) |

Is this a permanent or temporary position? Type X in one box.

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| --- | --- |
|  | Permanent position |
|  | Temporary position |

What faculty rank is requested? Type X in one box. Appointments above the rank of assistant professor must be approved by the Promotion and Tenure Committee, dean, chancellor, and president.

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| --- | --- |
|  | Instructor |
|  | Assistant professor |
|  | Associate professor |
|  | Professor |

Is the request for a tenure-track position or non-tenure track position? Type X in one box.

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| --- | --- |
|  | Tenure-track position |
|  | Non-tenure track position |

What is the anticipated start date for the position?

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|  |
| Start Date (MM/DD/YY) |

If this is a temporary position, what is the anticipated end date?

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| --- |
|  |
| End Date (MM/DD/YY) |

What are the responsibilities for this position? If not applicable, type NA.

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| --- |
| Teaching Responsibilities – Variety of courses and other teaching responsibilities, e.g., continuing education, thesis or dissertation, clinical teaching, etc. |
|  |
| Research/Scholarship Responsibilities – Expectations for scholarly activity, including expectations for extramural grant or contract funding. etc. |
|  |
| Service Responsibilities – Expectations for service to the department, college, university, profession, community, etc. |
|  |
| Clinical Practice Responsibilities – Percentage of time to be assigned for clinical practice, type and location of clinical practice, etc. |
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| Administrative Responsibilities – Assigned administrative responsibilities, e.g., assistant/associate program director, clinical education director, etc. |
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If this is a request for a new faculty position with teaching responsibilities, provide a justification that includes the following items:

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| Performance Measures in the Department or Program – Three- to five-year enrollment history, including student headcount, total number of credit hours generated, tuition revenue generated, number of degrees awarded, board/certification examination pass rates, student-to-faculty ratio. Documentation may be attached. |
|  |
| Faculty Workload Analysis – Range and average of faculty workload units over the past year, impact of requested position on average faculty workload, range and average of credit hours generated by faculty members. Documents may be attached. |
|  |

What is the market salary range for this position?

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| --- | --- |
| **$** | **$** |
| Low End of Salary Range | Upper End of Salary Range |

What is the source of information for the requested salary range?

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| --- |
|  |

Is the requested position already budgeted? Type X in one box.

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| --- | --- |
|  | Yes, the position is already budgeted |
|  | No, the position is not budgeted |

If the position is already budgeted, what is the source of funding?

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What start-up costs are anticipated for this position? Include only costs for new equipment, space renovations, support staff, etc. Do not include moving expenses or travel costs.

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| --- |
| **$** |
| Anticipated Start-Up Costs |

Itemize the anticipated start-up costs, e.g., equipment, space renovations, support staff, etc.

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What are the sources of funds for start-up costs? Type X for each source of funds and explain, if indicated.

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| --- | --- | --- |
|  | Department budget – already budgeted | |
|  | Department reserves (explain): |  |
|  | College budget – already budgeted | |
|  | College reserves (explain): |  |
|  | New revenue (explain): |  |

List any other special conditions, requirements, needs, or comments for this position.

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| --- | --- |
| Name of Requester |  |
| Contact Person (if different from the Requester) |  |

**Save a copy of this request for your file. Then, email an electronic copy of the request to LongSusanL@uams.edu.**

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| --- | --- |
|  | Request to fill a budgeted, vacant position is approved. Specific conditions: |
|  | Request to establish new faculty position is approved. Specific conditions: |
|  | Request is not approved. Reason: |

Dean Date