

Indicate the nominee's home faculty (or faculties):

FBIT                  FE<sub>d</sub>                  FESNS                  FEAS                  FHSc                  FSc                  FSSH

I nominate the following for a Graduate Faculty appointment at Ontario Tech University.

Name:

Rank:

Program:

This nomination is being made in accordance with the criteria for membership as defined in the Graduate Faculty Appointments Policy located in the University's policy library. Graduate Faculty must be tenured and tenure-track faculty at Ontario Tech University and have a research program that includes externally refereed publication and experience that is appropriate for the graduate program.

The individual is being appointed to the following (please check all that apply):

Graduate Diploma          Master's          PhD

Note: being the sole supervisor of a PhD student is restricted to Graduate Faculty who have advanced experience as appropriate for the graduate program.

Relevant Qualifications:

- |  |   |
|--|---|
| <input type="checkbox"/> inclusion in program proposal               | <input type="checkbox"/> research funding                   |
| <input type="checkbox"/> previous experience in graduate teaching    | <input type="checkbox"/> externally-refereed publication(s) |
| <input type="checkbox"/> previous experience in graduate supervision | <input type="checkbox"/> established research program       |

The nominee's CV is attached.

In signing this document, I verify that I have read the Graduate Faculty Appointments Policy located in the University's policy library.

Graduate Program Director	Dean of faculty offering program	Dean of nominee's home faculty	Dean of SGPS
Signature	Signature	Signature	Signature
Date (yyyy/mm/dd)	Date (yyyy/mm/dd)	Date (yyyy/mm/dd)	Date (yyyy/mm/dd)
Approved    Declined	Approved    Declined	Approved    Declined	Approved    Declined

Please provide the School of Graduate and Postdoctoral Studies with a detailed rationale for any nomination being forwarded without approval.

FOR SCHOOL OF GRADUATE AND POSTDOCTORAL STUDIES USE ONLY:			
Reported to Graduate Studies Committee:	Yes	No	Date:
Appealed to GSC of Academic Council:	Yes	No	Date: