FACULTY EMPLOYMENT REQUEST FORM

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| Complete one form for each faculty position.  |
|  Requestor First and Last Name:  |  Requestor Home Department:  |
|  Faculty Rank: Choose an item. |  Faculty Category: Choose an item. |
|  Will the initial appointment have an option of tenure on hire?  Choose an item. |  Provost Office Faculty Search Number:  |
|  Field of Concentration: |  Hiring Range: |
| **Position Information for Budget Purposes** Please enter position number:­­  Indicate the following: [ ]  New Position [ ]  Existing Position |
|   Will this position be funded by a source other than your college? [ ]  YES [ ]  NO If you selected YES, please specify the source: |
|   For Termed Research Faculty, please note if the position is: [ ]  Internally Funded [ ]  Externally Funded  If you selected Externally Funded, please specify the source: |
| **SERVICE MONTHS**

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| --- | --- | --- | --- | --- |
| **Position Number** | **Account Number** | **Account Name****Please provide all funding sources and effort** | **Duration of Support****Enter Dates** | **Total Budget****Available** |
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**INCUMBENT DATA****Must be completed for all replacements and transfers**Name of Departing Faculty Member / Date of Change:  Reason for Termination or Transfer: If transferred, to what Lehigh Department:  |
| **Position Description Summary** |
| **Position Description Requirements****Education:** **Relevant Teaching and Research Experience:** **Other Qualifications:**  |
| **POSITION APPROVAL** |
| The Provost Office will review requests for all positions to confirm budget availability. All positions funded by research accounts (429000-643999) will also require approval from the Office of Research and Sponsored Programs. The Provost Office will notify the requesting department of approval. **The faculty search process may begin upon receipt of the required approvals.**  |
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| ROUTING | DECISION | INITIALS | DATE |
| Department Chairperson | \_\_\_\_\_ Approved \_\_\_\_\_ Not approved |  |  |
| Academic Dean  | \_\_\_\_\_ Approved \_\_\_\_\_ Not approved |  |  |
| Office of Research & Sponsored Programs(if applicable) | \_\_\_\_\_ Approved \_\_\_\_\_ Not approved |  |  |
| Provost\* | \_\_\_\_\_ Approved \_\_\_\_\_ Not approved |  |  |
| ***\*Copy to Budget Office upon approval.*** |
| **Additional Remarks** |

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6/1/2023