**FACULTY EMPLOYMENT REQUEST FORM**

|  |
| --- |
| Complete one form for each faculty position.  |
|  Requestor First and Last Name:  |  Requestor Home Department:  |
|  Faculty Rank:  |  Faculty Category:  |
|  Will the initial appointment have an option of tenure on hire?   |  Provost Office Faculty Search Number:  |
|  Field of Concentration: |  Salary 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 Term Research Faculty, please note if the position is: ☐ Internally Funded ☐ Externally Funded  If you selected Externally Funded, please specify the source: |
| **SERVICE MONTHS**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Position Number** | **Index** **Number** | **Account Name****Please provide all funding sources and effort** | **Duration of Support****Enter Dates** | **Total Budget****Available** |
|  |  |  |  |  |
|  |  |  |  |  |

**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 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 only upon receipt of the required approvals.**  |
|

|  |  |  |  |
| --- | --- | --- | --- |
| 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 |  |  |
| ***\*Routing, Decision, Signature, and Date for some signees above may be completed in Interfolio Faculty Search*****ALL APPROVALS MUST BE SUBMITTED TO THE BUDGET OFFICE.** |
| **Additional Remarks** |

 |

6/1/2025