

Central Connecticut State University
UNIVERSITY SENATE ACTION

Senate Motion Number FS 17.18.005B

TO: President Zulma Toro
FROM: President of the University Senate

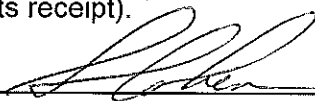
1. The attached motion of the University Senate, dealing with: **Promotion and Tenure Form for Coaches and Non-Instructional Athletic Trainers** is presented to you for your consideration.
2. This motion was adopted by the University Senate on **09/25/2017**.
3. After considering this motion, please indicate your action on this form, and return it together with the original copy to the President of the University Senate.
4. Under the By-Laws of the University Senate, Section 3.7, the following schedule of action is to be observed.

a) By **10/10/2017**, Senate action reported to the President of the University. (Within five school days of the session in which they are adopted).

b) By **10/24/2017**, the President of the University to return the motion to the President of the Senate. (Within ten school days of its receipt).

10/10/2017

Date



Stephen Cohen, President, University Senate

ENDORSEMENT:

TO: President of the University Senate
FROM: President Zulma Toro

1. Motion Approved : _____ ✓
2. Motion Disapproved: _____ (Explanatory statement must be appended).
3. Action "is deferred": _____
4. Resolution Noted: _____
5. Other: _____

10/18/2017
Date



President Zulma Toro

**EVALUATION AND RECOMMENDATION
FOR RENEWAL AND PROMOTION FOR COACHES**

For each category of evaluation and recommendation, one (1) original signed by the DEC and member evaluated and two (2) copies of the signed original.

I. DATA:

Name Date

Department

2nd Semester Evaluation: Years of Appropriate Professional Level Experience at CCSU

Years of Other Appropriate Professional Level Experience

Promotion: Years of Appropriate Professional Level Experience at CCSU

Years of Other Appropriate Professional Level Experience

Renewals: Years of Appropriate Professional Level Experience at CCSU

Years of Other Appropriate Professional Level Experience

Present Rank

Years at Present Rank

Requested Rank

Type of recommendation: Renewal
 Promotion

Type of Evaluation: 2nd Semester Evaluation
 Final Year of Appointment

Eligibility for Promotion: Appropriate degree and specified years of appropriate professional level experience

Substantially comparable credentials and/or experience (Article 6.3)

II. EVALUATION INSTRUCTIONS (Article 6.3 and 6.8)

MINIMUM STANDARDS (Article 6.3)

Minimum standards of appointment or promotion to each rank shall be:

I – Earned master’s degree for athletic trainer, master’s degree preferred for coaches, and two years of appropriate professional level experience.

II – Earned master’s degree for athletic trainer, master’s degree preferred for coaches, and three years experience.

III – Earned master’s degree for athletic trainer, master’s degree preferred for coaches, and five years experience.

IV – Earned master’s degree for athletic trainer, master’s degree preferred for coaches, and eight years experience.

A candidate who does not meet the above standards may also be appointed or promoted to a rank listed above, provided the candidate has credentials and/or experience substantially comparable to the listed standards.

CRITERION AND CATEGORIES (Article 6.8)

The criterion for evaluating coaches shall be the quality of service within the following categories, weighted in the order listed:

- 6.8.1 Administration and conduct of the assigned sport (e.g., adherence to institutional policies and applicable external rules governing the sport, fund raising, budget management, general program organization and administration).
- 6.8.2 Relationship with student athletes (e.g., recruitment of qualified student athletes, maintenance of acceptable graduation rates as established by the institution and team management).
- 6.8.3 Record of student athletes in competitive performance (e.g., program development, record of successful competitions).
- 6.8.4 Productive service to the department and University.
- 6.8.5 Years in rank.
- 6.8.6 Record of any disciplinary action in the member's personnel file at the time of the evaluation.

III. EVALUATION NARRATIVE: COMPLETE FOR ALL EVALUATIONS AND RECOMMENDATIONS. In the Evaluation Narrative, address each of the categories listed in Section II of this form.

IV. RECOMMENDATION (For Renewal, and/or Promotion)

Departmental Evaluation Committee: (Please type names and sign at right)

Date:

Coach Acknowledges Receipt of this Evaluation:

Within five (5) working days, Coach evaluated may append comments which will be attached to this report.

Reviewed by _____
(Athletic Director)

Reviewed by _____
(President)

NAME:

INVENTORY OF DOCUMENTS CONSIDERED FOR:

<u>No.</u>	<u>Description of Item</u>	<u>Source</u>	<u>Date Entered In File</u>
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