Central Connecticut State University UNIVERSITY SENATE ACTION

Senate Motion Number FS 17.18.007B

TO:	President Zulma Toro					
FROM	M: President of the University	Senate				
	The attached motion of the Universion of the Universion of the Universion of the University of Universit	sity Senate, dealing with: Promotion and Tenure you for your consideration.				
2.	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.					
	Under the By-Laws of the University to be observed.	Senate, Section 3.7, the following schedule of action				
	a) By $\underline{10/10/2017}$, Senate action reported to the President of the University. (Within five school days of the session in which they are adopted).					
	of the University to return the motion to the President					
	of the Senate. (Within ten school da	ays of its receipt).				
	10/10/2017	ays of its receipt).				
	·	Stephen Cohen, President, University Senate				
ENDO	10/10/2017	Morken				
ENDO	<u>10/10/2017</u> Date	Stephen Cohen, President, University Senate				
	10/10/2017 Date PRSEMENT: President of the University S	Stephen Cohen, President, University Senate				
TO: FROM	10/10/2017 Date PRSEMENT: President of the University S	Stephen Cohen, President, University Senate				
TO: FROM	10/10/2017 Date PRSEMENT: President of the University Solution President Zulma Toro	Stephen Cohen, President, University Senate Senate				
TO: FROM 1. 2.	10/10/2017 Date PRSEMENT: President of the University Solution President Zulma Toro Motion Approved:	Stephen Cohen, President, University Senate Genate (Explanatory statement must be appended).				
TO: FROM 1. 2. 3.	10/10/2017 Date PRSEMENT: President of the University Solution Approved: Motion Disapproved:	Stephen Cohen, President, University Senate Senate (Explanatory statement must be appended).				

10/18/2017

President Zulma Toro

5. Years in rank.

EVALUATION AND RECOMMENDATION FOR RENEWAL, TENURE, PROMOTION OR PROFESSIONAL ASSESSMENT FOR LIBRARIANS

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

I. DATA:						
Faculty Member	Date					
Department						
Professional Assessmen	t: Years of Service at CCSU					
Promotion:	Years of Service at CCSU and at other universities					
Renewals:	Years of Service at CCSU					
Tenure:	Years at CCSU and credited years granted at initial appointment					
Present Rank	Years at Present Rank					
Requested Rank						
Type of recommendation	Promotion Promotion					
Eligibility for Promotion	Tenure					
II. EVALUATION I	Substantially comparable credentials and/or experience (Article 5.3.5) INSTRUCTIONS (Article 8.3.1)					
	uating and recommending full-time members shall be the quality of activity, including keeping, within each of the categories listed below, weighed in the order listed:					
1. Load credit	1. Load credit activity – Professional effectiveness in providing Library Services.					
	 Professional activity, such as attendance and participation in conferences and workshops, membership and service in appropriate professional organizations and other professional activities. 					
3. Productive s	service to the department and university.					
4. Creative act publication.	ivity appropriate to one's field, such as delivering papers at conferences, research, study and					

6. Record of any disciplinary action in the member's personnel file at the time of the evaluation.

II. EVALUATION NARRATIVE: COMPLETE FOR ALL EVALUE Evaluation Narrative, address each of the categories listed in Section rank, applies only to the promotion recommendation.	
See attached	
IV. RECOMMENDATION (For Renewal, Tenure and/or Prom	notion)
Departmental Evaluation Committee: (Please type names and sign at right)	Date
·	
Faculty Member Acknowledges Receipt of this	
Evaluation:	
Within five (5) working days, the faculty member evaluated may ap	pend comments which will be attached to this
report.	
Reviewed by	
(Name/Title)	
Reviewed by	
(Provost)	

NAME:

INVENTORY OF DOCUMENTS CONSIDERED FOR:

No	Description of Item	Source	Date Entered In File
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