## STATEMENT OF INTEREST IN REAPPOINTMENT

To be assessed/reviewed and considered for reappointment prior to external Unit 18 applicants, you must submit your request to be considered for reappointment to your department chair or equivalent in accordance with the deadlines below, or within 30 days from the date on which the appointment letter was transmitted to you, whichever is later.

	Initial Appointment	Multi-year Appointment
		final year
9/12 Appointees	October 15	October 15
1/10 semester – Fall	October 15	October 15
1/10 semester – Spring only	February 1	October 15
<ol> <li>Do you want to be considered YES</li> <li>NO</li> </ol>	dered for reappointment?	
<ol><li>List the courses that you like to be considered for.</li></ol>		d/or other assigned duties that you would
<ol><li>For each quarter/semest you would like to receive</li></ol>		nt, list the appointment percentage that
Yea	r 1:	Appointment Percentage:
Fall Semester		
Spring Semester		
Yea	r 2:	Appointment Percentage:
Fall Semester		,,
Spring Semester		
Year	r 3¹:	Appointment Percentage:
Year Fall Semester	r 3¹:	Appointment Percentage:

Date

Attach your C.V. to this request form and return to your department chair or equivalent.

Department/Program/Unit

**Spring Semester** 

Name

<sup>&</sup>lt;sup>1</sup> Generally, consideration for a three-year reappointment will only be applicable to individuals who are on a twoyear appointment. If you have questions about whether year 3 is applicable to you, please consult with your department, program, or unit.