

**Request to Fill a Faculty Line**

Requesting Department:

Anticipated hire date:

Anticipated academic rank\*:

(\*Indicate if this position is part-time, OPS, Visiting, or Regular)

Position number:

FTE:

Anticipated salary range:

|  |  |  |  |
| --- | --- | --- | --- |
| **Salary Component** | **Amount** | **Justification** | **Source of Funds** |
| Anticipated Base Salary (w/out fringe) | $ |  | \_\_\_\_\_% State Funds  \_\_\_\_\_% Grant Funds  \_\_\_\_\_% MG&G Funds  \_\_\_\_\_% Other, explain: |
| Anticipated AEF supplement paid by the Dept. or earned by the individual | $ |  | Departmental AEF |
| Anticipated AEF supplement paid by the Dean’s office | $ |  | Dean’s AEF |

Anticipated Position Responsibilities:

|  |  |
| --- | --- |
| Responsibility | Brief explanation of responsibilities |
| \_\_\_% Teaching |  |
| \_\_\_% Dept Research |  |
| \_\_\_% Funded Research |  |
| \_\_\_% Faculty Practice | Working in Faculty Practice? \_\_\_\_\_ Yes \_\_\_\_\_ No  If so, review with the Assistant Director in the Department of Restorative Dental Sciences. |
| \_\_\_% Administration |  |
| \_\_\_% Other |  |

Do you anticipate requesting Research Start Up funds? Please indicate an estimated amount and provide a brief justification:

Anticipated space needs:

Will the new faculty require a private office? \_\_\_\_\_ Yes \_\_\_\_\_ No

Research space? \_\_\_\_\_\_\_\_\_\_\_\_\_ (square feet)

Please indicate specifics regarding the research space, e.g., wet lab, dry lab, proximity to specific equipment, etc:

Approved: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Approved: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Director of Finance Date Dean Date