College of Arts & Sciences

Interdisciplinary Faculty Appointments

Summary Description Document

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name and Rank of Appointee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Starting and Review for Renewal Dates for this Interdisciplinary Appointment Agreement:**

**Starting Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Review for renewal during Fall Quarter\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Note: Normally, the review for renewal would occur during the fifth year of the Interdisciplinary

Appointment Agreement. However, if the appointee is a probationary faculty member, the

Review for Renewal should be completed at least three full years prior to the end of the

probationary period unless this would require review during the first year of the agreement.

**Home Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Secondary Department(s) or Program(s):**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**1. Teaching expectations: Teaching is \_\_\_\_ % of total effort (typically 40%).**

Describe the distribution and nature of the teaching effort for the Home Department and

Secondary Department(s) or Program(s).

**2. Research expectations: Research is \_\_\_\_ % of total effort (typically 40%).**

Describe the distribution of research effort among the Home Department and Secondary

Department(s) or Program(s).

**3. Service expectations: Service is \_\_\_\_ % of total effort (typically 20%).**

Describe the distribution and nature of the service and administrative duties for the Home

Department and Secondary Department(s) or Program(s).

**4. Special Budgetary arrangements:**

Reminder: Please indicate any special indirect cost distribution agreements between the

participating departments.

**5. Modifications or special considerations regarding the Promotion and Tenure**

**criteria of the Home Department:**

**6. Peer Evaluation Committee(s):**

All peer evaluation committees of the Home department must have at least one voting

representative from the secondary department(s)/program(s). The number of

representatives and their department/program affiliation are to be indicated here:

**7. Office space, secretarial support, travel support, etc.:**

The Home Department will provide a faculty office and normal secretarial support. List

below any special support together with the source of that support.

**8. Other Considerations:**

**9 Signatures:**

**Faculty Member:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_**

**Chair of Home Department:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date** \_\_\_\_\_\_\_\_\_\_\_\_\_

**Dept. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Chair or Director of secondary departments or programs:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_**

**Dept./Program \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_**

**Dept./Program \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_**

**Dept./Program \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Dean: (Home Department)**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_**

**Dean: (Secondary Department/Program)**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_**