
CHECKLIST FOR FACULTY APPOINTMENT
“ CONTRACTUALLY LIMITED ”

Candidate's Name:	Department:
ID Number:	Position Number:
Proposed Rank:	CLA Type:
Start Date:	End Date:
CPSO# (if applicable)	

PACKAGE FOR FHS FACULTY RELATIONS

Department/School's Letter of Recommendation addressed to the Dean

Accepted Preliminary Letter of Offer

Fully signed Annual Personnel Agreement (if applicable)

Fully signed [Mutually Agreed Responsibilities](#) (R4) + **1 copy**

Approved [Permission to Recruit](#)

Copy of Advertising/List of ad locations

Itinerary/[List of interviews](#) /Letters from Interviewers

Letters of Reference (minimum of 3)

[Curriculum Vitae](#)

Approved Impact Analysis (if applicable)

Please note:

Incomplete submissions will be returned Please allow 4-6 weeks for processing and approval



CHECKLIST FOR FACULTY APPOINTMENT

“CONTRACTUALLY LIMITED”

Candidate's Name:

Department:

Proposed Rank:

CLA Type:

Start Date:

End Date:

PACKAGE FOR PROVOST

Department/School's Letter of Recommendation addressed to the Dean

Approved [Permission to Recruit](#)

Copy of Advertising/List of ad locations

Itinerary/[List of interviews](#)/Letters from Interviewers

Letters of Reference

[Curriculum Vitae](#)



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“CONTRACTUALLY LIMITED”

Candidate's Name:

Department:

ID Number:

Position Number:

Proposed Rank:

CLA Type:

Start Date:

End Date:

PACKAGE FOR FINANCE

[Payroll Authorization](#) (Green Form)

[RMA](#) (Yellow Form) (if applicable)

Accepted Preliminary offer

Fully Signed Annual Personnel Agreement (APA) (if applicable)

[HR Event Form](#) (only if candidate is an existing employee)



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ID Number:

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Start Date:

End Date:

PACKAGE FOR HR

Accepted Preliminary offer

Fully signed Annual Personnel Agreement (if applicable)

[Curriculum Vitae](#)

[Employee Contact and Deposit Information Form](#)