



# GRADUATE FACULTY STATUS NOMINATION FORM

Request to nominate a faculty member for graduate status.

**Instructions:** Submit this form along with a copy of the nominee’s vitae to begin the graduate faculty status approval process.

**Section A:** To be completed by nominating department.

**Nominee:** \_\_\_\_\_ **UTPB Email:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**College:** \_\_\_\_\_ **Department:** \_\_\_\_\_

**Section B:** Status. To be completed by nominating department.

Regular     Provisional

**Statement of nomination briefly highlighting qualifications.** Attach vitae to this form.

**Section C:** Approving signatures.

_____ <b>Printed Name of Department Chair</b>	_____ <b>Signature of Department Chair</b>	_____ <b>Date</b>
_____ <b>Printed Name of College/School Dean</b>	_____ <b>Signature of College/School Dean</b>	_____ <b>Date</b>
_____ <b>Printed Name of Graduate Council Chair</b>	_____ <b>Signature of Graduate Council Chair</b>	_____ <b>Date</b>
_____ <b>Printed Name of Graduate Studies Dean</b>	_____ <b>Signature of Graduate Studies Dean</b>	_____ <b>Date</b>

Submit nomination to: Graduate Studies MB1208  
4901 East University Blvd Odessa, TX 79762  
Email: gradstudies@utpb.edu  
Phone: 432-552-2530  
Fax: 432-552-3530