CAREER TRACK PROMOTION 2024-2025

SECTION 1: SUMMARY DATA SHEET DATE: NAME: PREFERRED PRONOUNS: **CURRENT TITLE: HOME DEPARTMENT:** COLLEGE: **CAMPUS ADDRESS: UA BUILDING:** ROOM # PO BOX# **TERMINAL DEGREE:** MONTH/YEAR OF TERMINAL DEGREE: YEARS IN CURRENT RANK: TITLE FOR WHICH YOU ARE APPLYING: TITLE SERIES: LECTURER **CLINICAL PROFESSOR** PROFESSOR OF PRACTICE RESEARCH PROFESSOR **REVIEW TYPE AND TITLE: PROMOTION TO PROMOTION TO PROMOTION TO** PROMOTION TO ASSOCIATE CLINICAL ASSOCIATE RESEARCH ASSOCIATE PROFESSOR OF **SENIOR LECTURER PROFESSOR PROFESSOR** PRACTICE **PROMOTION TO FULL** PROMOTION TO CT FULL PROMOTION TO CT FULL PROMOTION TO PRINCIPAL LECTURER **CLINICAL PROFESSOR** RESEARCH PROFESSOR PROFESSOR OF PRACTICE CT TRACK TRANSFER TO: ASSISTANT CLINICAL **ASSISTANT RESEARCH ASSISTANT PROFESSOR OF** CT LECTURER **PROFESSOR PROFESSOR PRACTICE** EMPLOYMENT ELSEWHERE AFTER TERMINAL DEGREE INSTITUTION RANK/TITLE DATES

DATES

RANK/TITLE

EMPLOYMENT AT THE UA

INSTITUTION