DATE

TO: Jerris R. Hedges, M.D., M.S., M.M.M.
    Dean, School of Medicine

FROM: Department Chair's Name
       Chair, Department of

SUBJECT: Proposed Appointment of ____________, __D. (degree) as Non-Compensated
         (Adjunct or Clinical Rank)

On behalf of the Department of ____________, I am pleased to propose Dr. ____________ for
appointment as ____________ (proposed faculty rank and series), effective ____________,
200_, through ____________, 200_ (end date should be one year from proposed start date).
Dr. ____________ is currently (indicate their current employment status). His/Her teaching,
research, and clinical activities (as applicable) will take place primarily at (indicate where they
will be located).

Dr. ____________ received his/her __D. degree in ____________ from the University of __ in
19__. (Give some background information on their educational training and experience that
would qualify and justify them for the proposed appointment; you can even include any special
commendations or awards they received).

In teaching, Dr. ____________ will participate in (indicate what their teaching activities will consist
of during the proposed appointment period - who will they train and teach?).

In research activities, Dr. ____________ will focus on the study of (provide some information on
what their research activities will involve during the appointment period and what their research
achievements consist of; include the various journals they have published in and the number of
publications they have, if applicable).

In clinical activities, Dr. ____________ will provide (describe what their clinical activities will be, if
applicable).

In University and public service, Dr. ____________ will participate in (list some of their
professional activities and/or the committees they will participate in during the proposed
appointment, if appropriate).

The Department of ____________ faculty reviewed the proposed appointment and are
unanimously in favor of the appointment as proposed; therefore, I join them in enthusiastically
supporting the appointment of Dr. ____________, as ____________ (proposed appointment
rank and series), effective ____________, 200__.

APPROVED/DISAPPROVED:

Jerris R. Hedges, MD, MS, MMM Date
Dean, JABSOM