



**Department Personnel Committee Ballot**

Name of Candidate:

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Department/School:

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Candidate for:

- Reappointment
- Continuing Appointment
- Promotion to Associate Professor/Associate Librarian
- Promotion to Professor/ Librarian

Recommendation:

- Yes, strongly recommend
- Yes, recommend
- Yes, recommend with reservation
- No, do not recommend

Explain the reason(s) for your recommendation:

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Signature

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Name (typed)

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Date

*This completed form (including signature) shall become part of the candidate's review process and shall be shared with the candidate and all subsequent reviewers.*

**In attendance at DPC deliberation \_\_\_ Yes \_\_\_ No**