

Portfolio Transmittal Form

Fill out the first five lines and include as the first page of your portfolio. A copy will be sent to you after each signature, so that you can trace the progress of your portfolio.

Faculty member's name _____

Portfolio submission date _____

Portfolio submitted for tenure consideration [] Yes [] No

Portfolio submitted for promotion consideration [] Yes [] No

If yes: Portfolio submitted for promotion to: _____

The portfolio has been reviewed by:

Review Committee Chair	Date
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Department Chair	Date
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Vice President	Date
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President	Date
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