***ALL FIELDS REQUIRED UNLESS NOTED OTHERWISE Submitter Name*** Click here to enter text.

***Email Address*** Click here to enter text.

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| **GENERAL INFORMATION** |

**Legal Name** *(include middle name or initial)***:** Click here to enter text. **Degree(s):** Click here to enter text.

**Person number:** Click here to enter text.**Preferred Email Address:** Click here to enter text.

**Current Rank:** Click here to enter text.

**Primary Academic Department (and Section):** Click here to enter text.

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| **FACULTY APPOINTMENT:** Faculty with more than 0.2 FTE post-retirement are not eligible to be Emeritus. |

**FTE Post-retirement:** Click here to enter text.

**Last day of current faculty appointment:** Click here to enter a date.

**Effective Date for requested Emeritus faculty appointment:** Click here to enter a date.

Requested Job Code: (C9803) Emeritus Faculty

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| **SUPPORTING DOCUMENTS** (required for appointment review and approval) |

**Curriculum Vitae** (in any form)

**Chair letter of recommendation**

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| **ACCESS & PRIVILEGES** (If any of the following are requested, additional documentation is required) |

*All with WFBMC access are subject to required regulatory and institutional annual training to retain badge. Those with electronic access only, are subject to required compliance training. Reference WFBMC Non-Employee Access Policy at:* [*http://intranet.wakehealth.edu/Departments/Human-Resources/Workforce-Planning-and-Development/Non-Employees.htm*](http://intranet.wakehealth.edu/Departments/Human-Resources/Workforce-Planning-and-Development/Non-Employees.htm)

**After Faculty Affairs’ Approval, the Department will need to submit a ticket to Contingent Workforce to retain any of the following levels of Access:**

* Medical Center (ID Badge / Parking)
* Email/system
* Library

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| **DEPARTMENT APPROVAL** |

Faculty appointments are subject to the approval of the Dean and will be announced and approved by the Faculty Executive Council and the Board of Trustees.

Click here to enter a date.

**Department Chair**  **Date**

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| **FACULTY AFFAIRS APPROVAL** |

Click here to enter a date.

**Senior Associate Dean, Faculty Affairs** **Date**