

Name: _____ Social Security Number: _____ Date of Birth: _____ Sex: Female <input type="checkbox"/> Male <input type="checkbox"/> Ethnicity: _____ Previous Position: _____	School/College: _____ Department: _____ Highest Degree Earned: _____ Year Completed: _____ Degree Granting Institution: _____ Official Transcript Received: Yes <input type="checkbox"/> No <input type="checkbox"/>
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REGULAR FACULTY

Position Title: _____

Effective Date: _____

New Position: Yes No

Replacement: Yes No

Previous Salary of Person Being Replaced: _____

Name of Person Being Replaced: _____

New Base Salary:

Moving Expenses: _____

Computer Purchases: _____

Startup/ Other Expenses: _____

Total: _____

NON-REGULAR FACULTY

Position Title: _____

Effective Date: _____

Total Number of Semesters Taught: _____

New Position: Yes No

Replacement: Yes No

Previous Salary of Person Being Replaced: _____

Name of Person Being Replaced: _____

New Salary:

Number of Courses and/or Hours: _____

Fall: # of courses # of hours

Spring: # of courses # of hours

Is individual currently on payroll through another division of Tulane? Yes No

If yes, Name of Department: _____

Account Number: _____ % _____

Account Number: _____ % _____

Account Number: _____ % _____

Account Number: _____ % _____

Account Number: _____ % _____

Account Number: _____ % _____

Is the incoming faculty already vested within TIAA/CREF at previous institution? Yes No

If yes, where: _____

Previous Teaching years for Tenure Consideration:

Year and Semester of Tenure Decision: _____

Course Information:

Course ID#	Course Title	Credit Hours
_____	_____	_____
_____	_____	_____
_____	_____	_____

COMMENTS:

Department Chair: _____ Date: _____

Dean: _____ Date: _____

Provost: _____ Date: _____