

## Request for advanced rank appointment or immediate tenure: WVU School of Medicine

**Must submit a CV with form**

**Faculty Name:**

**Date of Request:**

**Rank Requested:** Associate Full Professor

**Track:**

Clinical Track

Clinician (non-tenure)

Clinical Educator (non-tenure)

Clinician Scientist (tenure)

Professional Programs

Professional Programs Scientist (tenure)

Professional Programs Clinical/Health Sciences  
Educator (non-tenure)

Scientist Track

Scientist (tenure)

Scientist Educator (non-tenure, term appointment)

Specialty Tracks (non-tenure)

Research Faculty

Service Faculty

Lecturer (part-time)

**Immediate tenure:** Y N

**Effort allocation as per offer letter:**

Clinical %

Education %

Research %

Service %

Specify if course director or residency/fellowship director:

**Current Rank:** Assistant Associate Full Professor

**Current Institution:**

**Date of rank:**

**Tenured at current institution:** Y N

**CV Review:**

Evidence of significant contributions clinical service: Y N

Evidence of significant contributions in education: Y N

Number of full-length peer-reviewed publications (only those published) since last appointment or promotion:

For full professor only: Evidence of a national/international reputation: Y N

Basis:

**For clinical educator/clinician scientist only**, number of publications as first/senior author:

**For clinician scientist track only:**

Number of grants transferring:

Number of grants as PI:

Grant funding as percent of proposed salary support: %