

## University Senate Committee Selection Form

NAME:

DEPARTMENT:

E-MAIL

(Please complete all pertinent information pertaining to position and rank)

Choose appropriate box:

FACULTY	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
LIBRARIAN	<input type="checkbox"/>		
COACH	<input type="checkbox"/>		
PROFESSIONAL STAFF	<input type="checkbox"/>	<input type="checkbox"/>	

Select Committee (rank 1st - 5<sup>th</sup> choice)  
(see attached Committee Choices and descriptions)

Did you serve on this committee before? Y/N

1 <sup>st</sup>		<input type="checkbox"/>
2 <sup>nd</sup>		<input type="checkbox"/>
3 <sup>rd</sup>		<input type="checkbox"/>
4 <sup>th</sup>		<input type="checkbox"/>
5 <sup>th</sup>		<input type="checkbox"/>

Are you willing to serve on the Following Committees outside your Department if needed:	Y/N
Other Departmental Tenure & Recontracting: must be tenured and will not be serving on University T & R Committee	<input type="checkbox"/>
Inter-Departmental Promotion Committee: must be tenured; full or associate rank; will not be applying for promotion; will not be serving on College Promotion Committee or own Departmental Promotion Committee	<input type="checkbox"/>
Willing to serve on other University Committee that may be needed throughout the academic year	<input type="checkbox"/>
Willing to serve on 2 committees	<input type="checkbox"/>

Return this form by email: [browne@rowan.edu](mailto:browne@rowan.edu) or University Senate Office  
Suite 432 Campbell Library by Friday May 8, 2020