

**DEPARTMENT RTP DOCUMENT  
APPROVAL TRACKING RECORD**

<b>Department:</b>	
<b>Starting Year for Department RTP Document:</b>	
<b>Intended Length for use of Department RTP Document: (maximum 5 years)</b>	

**DEPARTMENT**

<p>“This Department RTP Document has been approved by a majority vote of the probationary and tenured faculty in this department.”</p>			
Dept. Chair:	_____	_____	_____
	Printed Name	Signature	Date
DRTPC Chair:	_____	_____	_____
	Printed Name	Signature	Date

**COLLEGE RTP COMMITTEE**

**COLLEGE/SCHOOL DEAN**

<p>“I have reviewed this Department RTP Document and make the following recommendation.”</p>			
1.	Recommend Approval		
2.	Recommend Approval, but concerns noted in attached memo.		
3.	Recommend to DENY Approval (explanation must be attached.)		
Dean/Director:	_____	_____	_____
	Printed Name	Signature	Date

**ACADEMIC AFFAIRS**

1.	Approved for the following years _____.		
2.	Not Approved (Explanation attached.)		
AVP for Faculty Affairs:	_____	_____	_____
	Printed Name	Signature	Date

In cases where the Department RTP Document does not conform to the provisions of the Collective Bargaining Agreement or University Policy 1328 (formerly Appendix 16) or Policy 1329 (formerly Appendix 10), those documents take precedence.