

CERTIFICATION OF CURRENT FACULTY APPOINTMENT

(Please complete the section that applies to the applicant)

Current Faculty Appointment

By signing this document, I certify that the applicant,

(INSERT APPLICANT NAME)

currently holds a full-time faculty appointment at

(INSERT INSTITUTION NAME)

The applicant's current title is:

(INSERT APPLICANT'S TITLE)

This is the applicant's initial faculty appointment: ____Yes ____No

The Research Scholars Programs consider the initial faculty appointment to be the first full-time faculty appointment obtained after completing any fellowship roles. **If yes has been selected, by signing below, I certify that this position was initially obtained on or after April 15, 2016.**

Please complete the section below if the current faculty appointment is not your initial appointment. If your current position is your first faculty appointment, disregard the section below and proceed to signatures.

Initial Faculty Appointment

The applicant's initial faculty appointment was,

(INSERT APPLICANT'S INITIAL POSITION TITLE AND INSTITUTION)

this position was initially obtained on or after April 15, 2016.

Signatures

Applicant Name: _____ Signature: _____ Date: _____

Mentor Name: _____ Signature: _____ Date: _____