TO: W. R. Woodson
FROM: 
DATE: 
RE: Administrative/Professional Advancement Rank for New Hires, Reclassification or Transfers

DEPARTMENT NAME

TYPE OF APPOINTMENT (NEW, RECLASS, TRANSFER)

NAME
TITLE
EFFECTIVE DATE
POSITION CODE
CURRENT RANK (IF APPLICABLE)

RECOMMENDED RANK

RECOMMENDED NUMBER OF MONTHS CREDIT GIVEN (IF APPLICABLE) AT TIME OF APPOINTMENT TO RECOMMENDED RANK

JUSTIFICATION (I.E. EDUCATION AND/OR WORK EXPERIENCE)

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APPROVED____________________________________________________________

W. R. Woodson  
Associate Dean - Agriculture

Approved copies to:  
Department Head  
Department Business Office  
Sr. School Business Manager