

WINONA STATE UNIVERSITY  
INDIVIDUAL PROMOTION RECOMMENDATION FORM

This recommendation form is to be completed by each department member for each person making application for promotion. Subsequent to departmental action on the application, these recommendation forms shall be forwarded to the dean/supervisor. Please indicate abstentions on this form if you wish to abstain.

\_\_\_\_\_  
Name of Person Being Considered for Promotion

\_\_\_\_\_  
Date

\_\_\_\_\_  
Department

Promotion shall be based on the principle of demonstrated consistent performance and high achievement. The criteria to be used shall include:

1. Demonstrated ability to teach effectively and/or or perform effectively in other current assignments.
2. Scholarly or creative achievement or research,
3. Evidence of continuing preparation and study,
4. Contribution to student growth and development,
5. Service to the university and community.

ON THE REVERSE SIDE OF THIS FORM, PLEASE WRITE YOUR RECOMMENDATION, ADDRESSING EACH OF THESE CRITERIA. The recommendations of the department members along with documentation are sent to the dean by the last day of January of that year or the date as specified on the annual WSU Academic Deadline Calendar. Unsigned recommendations, abstentions, and recommendations unsupported by comments on each of the criteria are not counted. Unsigned recommendations will be discarded.

\_\_\_\_\_ Recommend Promotion

\_\_\_\_\_ Recommend Denial

\_\_\_\_\_ Abstain

\_\_\_\_\_  
Name of Recommender

\_\_\_\_\_  
Signature of Recommender,

\_\_\_\_\_  
Date