

Instructions: Please list the name, rank, and status for each member elected to the department recruitment committee. Submit to faculty-recruitment@sjsu.edu in Faculty Affairs. If membership changes for any reason, you must notify University Personnel-Faculty Affairs (UP-FA) at faculty-recruitment@sjsu.edu.

Department Chair			
Department			
CHRS Requisition Number		Date of Election	
Was secret ballot used as required?	Yes <input type="checkbox"/>		No <input type="checkbox"/>

MEMBERSHIP OF COMMITTEE						
	Name	Rank	Probationary?		FERP?	
			Yes	No	Yes	No
1.			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Add additional committee member in Comments below

Committee Chair Name		Date	
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COMMENTS

Department Chair Signature		Date	
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