Adjunct Clinical Faculty Appointment Request Memo Template  
Must be on UNTHSC letterhead

Please submit packet to Faculty Affairs at least **10** business days   
prior to start date to allow for signature approval

**NOTE:**  *If this is a paid adjunct appointment, a position must be posted through HR. HR will send an Adjunct Faculty Appointment Approval email to the department and Faculty Affairs.*

**MEMORANDUM**

TO: (Dean)

FROM: (Department Chair)

DATE:

RE: (Name of new adjunct clinical faculty member)

I am requesting an adjunct clinical faculty appointment for *<insert name>* in the Department of *<insert* *name of department>.* I am requesting that <*he/sh*e> be appointed at the rank of Adjunct Clinical *<enter* *requested rank>* on non tenure track. The start date for Dr. *<insert* *name>* is anticipated to be *<insert start date>. Dr. <insert name>*

*<will/ will not>* be paid for <his/her> services*.* (If paid, use this statement): The position has been posted and approved by HR.

***NOTE:***

*Please include a brief paragraph regarding duties the new adjunct clinical faculty member will be performing, also including place of affiliation.*

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Packet Prepared By – Type Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Dean Approval / Date