University Term Professorship Application Form – IFAS

Name (as you wish it to appear in all publications):

_____

Academic Title (as you wish it to appear in all publications: e.g., Professor, Associate Professor)

_____

Tenure Department(s): _____

Center (if applicable): _____

Unit Leader(s): _____

Start Date at UF (month/year): _____   Date of last promotion (month/year): _____

Contact Information:

     Campus Address: _____

     Campus Phone Number: _____

     Email Address: _____

Please include the following supporting documents with this application:

- A signed letter of nomination from the unit leader that documents the candidate's qualifications for the University Term Professorship
- A brief CV using the IFAS template