FDA Department Head's Letter Form

Name of faculty member you are recommending for funding: Department of faculty member:				
How many years has this facul How many years has this facul				- -
Is this faculty member tenured	or tenure track?	Tenure	Tenure tra	ck
Does this faculty appointment	contain some research t	enths? Yes	%	No
List this faculty member's acce faculty member, other externa		s of funding (e.g., s	tartup funds i	f you are a new
Is your department committin		? If so, please state	e the amount.	
Yes	_ No			
Please discuss how this faculty benefit their career, your depa address how prestigious the ir from a friend/colleague to lead	rtment, college, and K-S nvitation is (i.e., invitatio	tate. If an invited	speaker, this i	nput should
Signature		Date		