

CRITERIA AND GENERAL GUIDELINES FOR FACULTY APPOINTMENTS
PROMOTION AND TENURE

07/16/97

I. INITIAL APPOINTMENTS

A person who received an initial appointment to a given rank should have credentials and experience equivalent to individuals promoted to the same rank. A doctoral degree or appropriate professional experience is a necessary qualification for appointment to faculty status at Assistant Professor or above. Initial appointments at the rank of Associate or Full Professor will be reviewed by the Promotions and Tenure Committee. A matrix system will be used to estimate the approximate faculty effort in each of the three main areas of academic endeavor - i.e., teaching, research and service. A tenure track appointment implies a commitment to exemplary teaching on the part of all faculty, regardless of pathway. The level of activity in research and clinical service largely influences the assignment to a given pathway. The chart below illustrates the matrix concept depicting examples and ranges of effort of the different pathways.

COMPENSATED TRACKS

	Tenure Track			Non Tenure Track	
	Basic Scientist Pathway	Clinical Scientist Pathway	Clinical Educator Pathway	Research Scientist Pathway*	Clinical Attending Pathway*
TEACHING	30%10 - 35%	30%10 - 50%	30%10 - 65%	5%0 - 10%	5%0 - 10%
RESEARCH	60%50 - 85%	30%15 - 85%	10%5 - 15%	95%90 - 100%	5%0 - 10%
SERVICE (Clinical, Administrative)	10%5 - 35%	40%5 - 75%	60%30 - 85%	0%	90%80 - 100%

The goal of clinical departments should be to have the majority of tenured and untenured faculty in the Clinical Scientist pathway. Faculty from the AHEC will usually be Clinician-Educators and will not be included in departments for purposes of the calculations described above. The numbers and types of faculty positions assigned to the Clinical Educator and Clinical Attending pathways in each department will be determined by the needs of the College of Medicine and the department. Based upon these needs, individuals who fulfill departmental criteria may be appointed in specific available positions to the Clinical Educator pathway with the approval of the Dean of the College of Medicine. The Clinical Attending and Research Scientist pathways are non-tenure track pathways. Therefore, appointments to the Clinical Attending and Research Scientist pathways are made on an annual basis and carry with them no tenure commitment from the University. Before the time of appointment, the Departmental Chair will meet with each faculty member to negotiate and record his or her responsibilities, expectations, and career goals. These deliberations will determine the appropriateness of assignment of a faculty member to a position in any particular pathway. Once appointed, clinical faculty may switch between the clinical scientist and clinical educator pathways (with approval of the respective department chair and the Dean) during the first

36 months of service. Additionally, with approval of the respective department chair and the Dean, faculty appointed to a tenure-track position may change to a non-tenure track. Similarly, under unusual circumstances and with the approval of the respective chair and the Dean, faculty appointed in a non-tenure track may, prior to 6 years of service, switch to the tenure track provided that each year of service in the non-tenure track shall count as one year of probationary status under the tenure track. A faculty member can only make a single change between tenure track and non-tenure track. An individual who has switched to a non-tenure pathway may not return to a tenure pathway. The Dean's decision with regard to changes in pathways and tracks shall be final, subject to the usual appeals mechanisms.

II. **REAPPOINTMENTS AND PROMOTIONS**

Reappointment of non-tenured faculty to a given rank requires that the individual meet the requirements of that rank and show good year-to-year performance in teaching, research and service as appropriate for the particular pathway to which he/she is assigned. To be considered for promotion, the faculty member must have the qualifications for the next rank. It is possible to be a valuable faculty member at a certain rank or many years without demonstrating sufficient progress to merit promotion.

A. **INSTRUCTOR**

The rank of Instructor is appropriate for qualified individuals who have limited experience in teaching, research and service. Faculty may be advanced from Instructor to the rank of Assistant Professor in either the Tenure or Non-Tenure track at the request of the Departmental Chair with the approval of the Dean. While serving as an Instructor, a person is expected to demonstrate significant professional growth, as evidenced by active involvement in the following:

1. Instructors who are basic scientist are expected to apply for research support within the period of this appointment. The application can be for institutional general research support and/or a research grant from an external source, such as one of the federal agencies.
2. Instructors who are clinicians are expected to contribute actively to the teaching program, to develop improved clinical skills and to become involved in original research, or to support and participate in ongoing institutional research.

B. **TENURE TRACK**

1. **ASSISTANT PROFESSOR**

An initial appointment of Assistant Professor may be offered to individuals who have the qualifications for that rank.

While serving as an Assistant Professor, an individual is expected to demonstrate significant development as an academician evidenced by the criteria listed below.

- a. **Teaching Ability.** Satisfactory teaching is basic for appointment and reappointment at the Assistant Professor rank. Effort and progress toward becoming an excellent teacher must be demonstrable, with consideration given to innovative teaching. Shared teaching in other departments and in other UAMS colleges, when approved by the Chairman, will be equated with instructional

activities in the department of primary appointment. Documented evaluation of the quality of an individual's teaching performance is the responsibility of the Chairman, who should seek the counsel of other faculty members and students.

The teaching ability of the basic scientist is demonstrated in lectures, laboratory instruction, small group seminars, and individual tutorials for medical and graduate students. Participating in the affairs of the graduate faculty is also expected of a basic scientist at the Assistant Professor level. The clinical faculty member is evaluated on the supervision of students, housestaff and fellows, and the dedicated and effective teaching in clinical rounds, conferences, lectures, and individual tutorial sessions.

- b. **Research Performance.** An Assistant Professor is expected to develop a research program and to publish scientific papers in peer-reviewed journals. Assistant Professors in the basic scientist pathway should develop sufficient extramural funding to support their research activities. Assistant Professors in the clinical scientist pathway are expected to secure adequate funding for their independent research through extramural research grants, service contracts, and/or through the development of a clinical practice. Research is also encouraged for Assistant Professors in the clinician-educator pathway, who should support and participate in ongoing institutional research initiatives.
- c. **Service (Clinical, Administrative).** To be appointed at the Assistant Professor level, all clinical faculty (clinical scientists and clinical-educators) must have demonstrated excellent skills in patient care and should receive the strong endorsement of their departmental chairman. Skilled patient care is of such basic importance that it must be considered a condition for annual reappointment for all clinicians.

Service on departmental and institutional committees is expected of an Assistant Professor in each of the academic pathways.

- d. **Professional Recognition.** Assistant Professors in all pathways will seek and maintain membership in appropriate professional societies and organizations. They will also continue their own professional education and where appropriate, will seek advanced certification or other such special qualifications. Basic and clinical scientists should be developing a regional and national reputation.

2. **ASSOCIATE PROFESSOR**

Promotion to the rank of Associate Professor is considered to be a very important step for both the University and the faculty member. It would be unusual for a person to be promoted to Associate Professor with less than five years experience at the Assistant Professor rank. A significant degree of maturity as a scientist, teacher and/or clinician must be clearly evident before promotion will be considered.

- a. **Teaching Performance.** Exemplary teaching is an important consideration for appointment at the Associate Professor level. The faculty member should have assumed increased responsibility in departmental teaching programs. Examples of such increased responsibilities for basic science faculty include directing graduate seminars, service as a graduate or medical student course leader, teaching outside one's own area of special interest, and serving as a major advisor on thesis and dissertation committees. Clinical faculty members should exhibit expertise in teaching activities such as conducting high quality patient rounds, conferences and lectures. Evaluation as to whether an individual performs in a manner appropriate for an Associate Professor is the responsibility of the Departmental Chairman, who should obtain the counsel of the faculty and students. The relative weight of teaching performance in a decision to appoint or to promote to Associate Professor will depend on the role of the individual faculty member in the department.

In accordance with faculty policy on evaluation of teaching (as approved by the general faculty, Spring, 1986 and June, 1987) evaluation of teaching performance, where appropriate, should be obtained from medical students, housestaff, fellows, graduate students and peers. Evidence of teaching contribution should include the number of local teaching initiatives and contact hours (seminars, lectures, clinical case conferences, grand rounds) for which the faculty member was responsible. In addition, evidence of community education activities as well as participating in local, regional and national educational programs, if documented, will favor promotion. It is the combined responsibility of the Departmental Chairman and the individual faculty member to assure that teaching skills are appropriately evaluated and that an accurate record of teaching contributions is kept.

- b. **Research Performance.** Research and scholarly achievement are integral features of academic life and are important criteria for appointment or advancement to the rank of Associate Professor. Productivity in research and scholarly activity is demonstrated by the publication of scientific articles and participation in national and/or international scientific meetings. Quality of the research and independence of scholarship as judged from the papers is more important than the number of papers.

The ability to generate and sustain financial support for research is an important consideration for promotion to Associate Professor. Basic scientist candidates for promotion to Associate Professor should have been either a principal investigator or a co-investigator in one or more research grants from an extramural agency employing the peer review process. This is to provide evidence of the candidate's ability to develop a good research project, prepare acceptable applications, and obtain general support. An NIH Research Career Development Award or an award of similar stature from other agencies or national foundations will be counted as a research grant, but Institutional General Research Support grants for pilot studies will not be counted.

Clinical scientist candidates for promotion to Associate Professor must have developed skills which support their independent research either through clinical practice or research grants.

Basic and clinical scientist candidates for promotion to the Rank of Associate Professor should submit copies of their five most meritorious publications for consideration by the Promotion and Tenure Committee. Clinical Educators are also encouraged to submit evidence of their scholarship. In order that a publication be given weight for promotion, it must be published or "in press". A candidate should be the senior author on a number of publications. The publication of these papers alone does not insure promotion. Most important is evidence of continuing, productive, independent and mature scholarship.

- c. **Service (Clinical, Administrative).** In addition to teaching and research, a person nominated for promotion to Associate Professor is expected to have shared in the service load for departmental and university programs.

For faculty in both clinical tracks, diligence and excellence in the care of patients are central considerations for appointment or promotion to Associate Professor. Within clinical departments, the time commitment to patient care activities will vary, but will frequently average 50% or more of the total available effort. The assessment of clinical productivity will be based on an evaluation by the Departmental Chairman.

Evidence must be presented attesting to the clinical skills of the clinical faculty member, as evidenced by respect for this competence by academic and community physicians with whom the faculty member works. Clinical competence should be addressed by supporting letters from the Departmental Chairman and from faculty members within the division and the College of Medicine.

For basic scientists, service may be assessed by reviewing the type and complexity of committee work or administrative role. Clinicians should assume appropriate administrative activities in the affiliated hospitals and the College of Medicine. Evidence of participation and documentation of substantive valuable contributions should be included. Chairmanships of committees, or other evidence of active involvement in administration is important and should be documented.

- d. **Professional Recognition.** Basic and clinical scientists eligible for appointment or for promotion to Associate Professor should have established a reputation in the national or international medical/scientific community. In addition to research productivity, reputation is judged by such evidence as participation in appropriate professional organizations and presentations before national and/or international meetings. Additionally, board certification in the appropriate discipline, and, where appropriate, subspecialty certification is expected for promotion to Associate Professor. Candidates considered for promotion to Associate Professor should have at least two letters of recommendation obtained by the Chairman from

recognized national authorities in a candidate's special field of interest not involved in prior training or employment. Other letters of recommendation are encouraged.

- e. **Faculty Vote.** A non-binding vote by secret ballot of the Associate and Full Professors in the candidate's department is recommended for those individuals being considered for promotion to Associate Professor. An alternative is a departmental promotions committee which would judge the readiness of the candidate for promotion. The departmental chair (or division director in cases where the division director reports directly to the Dean) will retain the authority to nominate the candidate. The results of any departmental or committee vote should be made available to the Promotion and Tenure Committee.

3. **PROFESSOR**

Promotion to the rank of Professor is a high honor of the University and is reserved for those members of the faculty who have demonstrated outstanding ability. It is not based on length of service alone. Candidates should meet all of the criteria outlined for the rank of Associate Professor. Additionally, they should have considerable time and experience in rank, additional publications, and provide other evidence of scholarly activity and professional recognition.

- a. **Teaching Ability.** The teaching performance of a candidate for Professor should serve as a standard of excellence for colleagues. Professors are expected to be accomplished teachers, and should be willing to share with less experienced faculty some of their learned skills in the art of medical and graduate education.
- b. **Research Performance.** The quality of research and of the resulting publications is the most important criterion of research performance. The candidate should have demonstrated independent and outstanding ability in research. Basic and clinical scientist candidates for promotion to the rank of Professor should submit copies of their ten most meritorious publications for review by the Promotion and Tenure Committee. Clinician candidates for promotion to Professor should provide evidence of their scholarship by submitting copies of their publications in peer-reviewed journals. The publication of these papers alone does not insure promotion. Most important is evidence of continuing, productive, independent and mature scholarship.

Continuing and current research support is important for promotion to Professor. A basic scientist candidate should have obtained at least two extramural research grants or have had a single grant renewed before attainment of the rank of Professor. The clinical scientist should have a similar record of extramural grant support or have generated support from clinical service activities for his or her independent scholarly work. The clinician should have a record of collaboration in investigations supported by extramural grants or clinical service activity.

- c. **Service, (Clinical, Administrative)** In addition to teaching and research, a person nominated for promotion to Professor is expected to have assumed a leadership role in the service load for departmental and university programs.

For faculty in both clinical pathways, appointment or promotion to the rank of Professor requires a demonstrated leadership and excellence in the care of patients. Within clinical departments, the time commitment to patient care activities will vary, but will frequently average 50% or more of the total available effort. The assessment of clinical productivity will be based on an evaluation by the Departmental Chairman.

Evidence must be presented attesting to the clinical skills of the clinical faculty members, as evidenced by respect for this competence by academic and community physicians with whom the faculty member works. Clinical competence should be addressed by supporting letters from the Departmental Chairman and from faculty members within the division and the College of Medicine.

For basic scientists, service of candidates for appointment or promotion to the rank of Professor is characterized by an increased complexity committee work or administrative role. Clinicians should assume appropriate administrative activities in the affiliated hospitals and the College of Medicine. Evidence of participation and documentation of substantive valuable contributions should be included. Chairmanships of committees, or other evidence of active involvement in administration is important and should be documented.

- d. **Professional Recognition.** Recognition among peers is very important for candidates for the rank of Professor. At least three letters of reference must be obtained by the Chairman and submitted to the Dean of the College of Medicine prior to the decision to promote the faculty member to this senior rank. Letters for basic and clinical scientists should come from outside the institution and from recognized authorities in the candidate's special field of interest not involved in prior training or employment. This is not to suggest that letters from people who know the candidate well will not also be considered.

Professional recognition will also be judged on the basis of scholarly articles, reviews and books written by the candidate. Other manifestations of outstanding performance include serving in a major administrative role in the College of Medicine, service on the study sections of federal granting agencies, offices or committee membership in national scientific organizations, service on editorial boards of scientific journals, and special recognition awards for distinguished achievement.

- d. **Faculty Vote.** A non-binding vote by secret ballot of the Full Professors in the candidate's department is recommended for those individuals being considered for promotion to Full Professor. An alternative is a departmental promotions committee which would judge the readiness of the candidate for promotion. The

departmental chair (or division director in cases where the division director reports directly to the Dean) will retain the authority to nominate the candidate. The results of any departmental or committee vote should be made available to the Promotion and Tenure Committee.

4. **EMERITUS STATUS**

Faculty retiring after distinguished service may be accorded emeritus status. This status is not routinely awarded but represents an honor for a career characterized by the highest academic abilities and devotion to the advancement of the College of Medicine.

B. **NON-TENURE TRACK**

1. **RESEARCH SCIENTIST PATHWAY**

a. **RESEARCH ASSISTANT PROFESSOR**

In this nontenure track, research is of primary importance, and teaching and service are of secondary consideration in reappointment or promotion. Salary will customarily be derived from external support.

- (1) **Research Performance.** A Research Assistant Professor in the non-tenure Research Pathway is expected to contribute in a significant manner, generally as a collaborator, to a funded research program and to publish scientific papers in peer-reviewed journals. Research Assistant Professors are also encouraged to secure their own extramural funding.
- (2) **Professional Recognition.** Research Assistant Professors will seek and maintain membership in appropriate professional societies and organizations. They will also continue their own professional education and where appropriate will seek advanced certification or other such special qualifications.

b. **RESEARCH ASSOCIATE PROFESSOR**

Five years of experience as Research Assistant Professor are ordinarily required. Criteria for promotion to Research Associate Professor will be almost entirely based upon research performance.

- (1) **Research Performance.** Research and scholarly activity are considered to be the major criteria for promotion in the non-tenure Research Scientist Pathway. Consequently, to be promoted to the rank of Research Associate Professor in the non-tenure pathway, the faculty member is expected to have

been a significant collaborator on a successful research program. The candidate is also expected to have demonstrated a degree of independence through efforts to obtain independent research funding and scholarly activity. Scholarly activity is demonstrated by the publication of scientific articles and participation in national and/or international scientific meetings. As in the tenure track pathways, the quality of such publications is more important than the absolute number of papers. Candidates for promotion to the rank of Research Associate Professor should submit copies of their five most meritorious publications for consideration by the Promotion and Tenure Committee. Ideally, the candidate should be the senior author on a number of publications. The publication of these papers alone does not insure promotion. Most important is evidence of continuing productivity and an increasing maturity in scholarship.

- (2) **Professional Recognition.** Candidates for promotion to Research Associate Professor should have established a reputation in the national or international scientific community. In addition to research productivity, reputation will be judged by participation in and presentations before national and/or international meetings and membership in appropriate scientific societies. Candidates considered for promotion to Research Associate Professor should have at least two letters of recommendation obtained by the Chairman of the Candidate's department from recognized national authorities in the candidates special field of interest not involved in prior training or employment. Other letters are encouraged.
- (3) **Faculty Vote.** A non-binding vote by secret ballot of the Associate and Full Professors in the candidate's department is recommended for those individuals being considered for promotion to Research Associate Professor. An alternative is a departmental promotions committee which would judge the readiness of the candidate for promotion. The departmental chair (or division director in cases where the division director reports directly to the Dean) will retain the authority to nominate the candidate. The results of any departmental or committee vote should be made available to the Promotion and Tenure Committee.

c. **RESEARCH PROFESSOR**

The title of Research Professor is an honor conferred on those who have demonstrated outstanding performance as a Research Associate Professors over a long period and whose activities are considered vital to a particular research emphasis of the College of Medicine. Criteria for promotion to Research Professor are the same as those of the Basic Scientist pathway in terms of research performance. The title may also be accorded to distinguished senior investigators recruited to the campus.

- (1) **Faculty Vote.** A non-binding vote by secret ballot of the Full Professors in the candidate's department is recommended for those individuals being considered for promotion to Research Professor. An alternative is a departmental promotions committee which would judge the readiness of the candidate for promotion. The departmental chair (or division director in cases where the division director reports directly to the Dean) will retain the authority to nominate the candidate. The results of any departmental or committee vote should be made available to the Promotion and Tenure Committee.

d. **EMERITUS STATUS**

Faculty retiring after distinguished service may be accorded the title of Emeritus Research Professor. This is a distinct honor that is not routinely awarded, but instead is reserved for those individuals whose devotion to research goals of the College have resulted in significant contributions over their careers.

2. **CLINICAL ATTENDING PATHWAY**

a. **CLINICAL ASSISTANT PROFESSOR**

The individual should be certified by the appropriate Specialty Board approved by the American Board of Medical Specialties or equivalent organizations and should show likelihood of developing an independent practice of his/her particular specialty. As this is a clinical nontenure track, research and teaching performance are not of primary importance in reappointment or promotion.

- (1) **Clinical Performance.** To be appointed at the Clinical Assistant Professor level, faculty in the non-tenure Clinical Attending Pathway must have demonstrated excellent skills in patient care and should receive the strong endorsement of their departmental chairman. Skilled patient care and the ability to maintain clinical productivity is of such basic importance that it must be considered a condition for annual reappointment.
- (2) **Professional Recognition.** Clinical Assistant Professors in this pathway will seek and maintain membership in appropriate professional societies and organizations. They will also continue their own professional education and where appropriate, will seek advanced certification or other such special qualifications.

b. **CLINICAL ASSOCIATE PROFESSOR**

At least five years of experience at the Clinical Assistant Professor rank are ordinarily required prior to promotion to Clinical Associate Professor. During

those years the faculty member should have developed an independent, exemplary practice of a medical, surgical or support specialty.

- (1) **Clinical Performance.** Diligence and excellence in the care of patients are the sole considerations for promotion or appointment to Clinical Associate Professor in this pathway. For promotion, evidence must be presented attesting to the clinical skills and productivity of the Candidate, as evidenced by respect for this competence by academic and community physicians with whom the Candidate works. Clinical competence should be addressed in the Chair's supporting letter.
- (2) **Professional Recognition.** Candidates for appointment or promotion to Associate Clinical Professor should have established a reputation for their clinical skills in the local and national medical community. Additionally, the Candidate should have appropriate specialty and subspecialty board certification(s), and should be a member of, and participate in appropriate professional organizations. Candidates for promotion or appointment to Clinical Associate Professor should have at least two letters of recommendation obtained by the Chairman of the Candidate's department from College of Medicine faculty not involved in the Candidate's prior training. These letters should attest to the Candidate's delivery of quality clinical care, the degree of clinical productivity and the degree of professional recognition within the medical community.
- (3) **Faculty Vote.** A non-binding vote by secret ballot of the Associate and Full Professors in the candidate's department is recommended for those individuals being considered for promotion to Clinical Associate Professor. An alternative is a departmental promotions committee which would judge the readiness of the candidate for promotion. The departmental chair (or division director in cases where the division director reports directly to the Dean) will retain the authority to nominate the candidate. The results of any departmental or committee vote should be made available to the Promotion and Tenure Committee.

c. **CLINICAL PROFESSOR**

The title of Clinical Professor is an honor conferred on those who have demonstrated a consistent and high level of practice activities over the span of many years. As such, it is customarily reserved for those senior individuals whose practice activities have been considered vital to the development of academic and educational programs over many years. An example would be individuals who have developed national or international referral patterns to their practice. The title may also be accorded to distinguished senior physicians recruited to the campus.

- (1) **Faculty Vote.** A non-binding vote by secret ballot of the Full Professors in the candidate's department is recommended for those individuals being considered for promotion to Clinical Professor. An alternative is a departmental promotions committee which would judge the readiness of the candidate for promotion. The departmental chair (or division director in cases where the division director reports directly to the Dean) will retain the authority to nominate the candidate. The results of any departmental or committee vote should be made available to the Promotion and Tenure Committee.

d. **EMERITUS STATUS**

Faculty retiring after distinguished service may be accorded the title of Emeritus Professor in the Clinical Attending Pathway. This is a distinct honor that is not routinely awarded but is instead reserved for those whose devotion to and abilities in the practice of medicine have made the most significant contributions to the College of Medicine over their career.

C. **VOLUNTARY NONCOMPENSATED TRACKS**

1. **ADJUNCT (BASIC SCIENTIST) PATHWAY**

Candidates for appointments and promotions in the Voluntary (Basic Scientist) Pathway should satisfy the same high standards of scholarship as full-time members of the faculty in the Basic Scientist Pathway. The list of adjunct faculty will be reviewed yearly. Continuation of appointment will require sustained participation in the academic program of the Department and adherence to the ethical and professional standards.

2. **ADJUNCT (CLINICAL) PATHWAY**

Criteria for initial appointment of voluntary clinical faculty (Little Rock campus or AHEC) include willingness to provide personal time and effort on a regular basis in one or more of the academic programs of the College of Medicine. The voluntary faculty are expected to participate in the formal courses or programs of the department of primary appointment in such frequency and type of endeavor as approved by the Departmental Chairman. Attendance and participating in regular departmental conferences and meetings is encouraged.

- a. **Reappointment.** The list of adjunct clinical faculty will be reviewed yearly. Continuation of appointment will require sustained participation in the academic program of the Department and adherence to the ethical and professional standards expected of physician-educators or community leaders.
- b. **Promotion.** Service to the respective Department and the College of Medicine is a major consideration for promotion; however, advancement of the practice and science of medicine is also important. The latter may be documented either by publications in local or national journals, or by scientific presentations at meetings.

Continued exemplary teaching will be especially valued in the consideration for promotion. The rank of Adjunct Clinical Professor is reserved for those few physicians who have provided consistent and unquestioned leadership in the medical community, and who have maintained a strong supportive effort on behalf of the Department and/or College.

III. **TENURE**

Faculty tenure is the right of continuous appointment, subject to Board of Trustees Policy 405.1. Only full-time faculty in the tenure eligible academic pathways with ranks of Assistant Professor, Associate Professor, Professor, and Distinguished Professor are eligible to be awarded tenure. Individuals in the Non-tenure Compensated, as well as voluntary non-compensated pathways are not eligible to acquire tenure.

The granting of tenure implies that the individual has completed successfully his or her probationary period and has become a permanent member of the University community. As such, he or she has acquired additional procedural rights in the event that dismissal proceedings may be filed.

The probationary period may not extend beyond seven years except as specifically provided herein. An initial appointment of one-half-year (academic or fiscal) or less will not be included in the probationary period. An initial appointment of more than one-half of a year counts as one full year for the probationary period. If more than one-half of any year is spent in an off-campus duty assignment, or less than a full-time appointment, or in leave of absence without pay status, that year shall not apply toward the probationary period.

During the first six years of the probationary period, a tenure-track faculty member may request, for reasons set forth below, that the probationary period be extended by one (1) year. The reasons for such a request are the same required under the Family and Medical Leave Act of 1993 and are as follows: (a) the birth of a child to the faculty member or his spouse and its care during the first year; (b) the adoption of a child by the faculty member or placement in the faculty member's home of a foster child; (c) the care of the faculty member's spouse, child, or parent with a serious health condition; (d) the serious health condition of a family member.

A request to extend the probationary period for these reasons shall first be directed in writing to the Departmental Chair for approval and must also be approved by the Promotion and Tenure Committee, the Dean, the Chancellor, and the President, under such procedures as the President shall adopt. These procedures may include, but shall not be limited to, the manner in which the faculty member's duties and salary, if any, are determined during such year, the information which is required to substantiate a request and the extent to which a faculty member's performance during such year may be considered in awarding tenure. An individual who has already received a written notice of non-reappointment as defined in Board Policy 405.1, paragraph IV. B, may not be granted an extension in the probationary period.

As a general rule, the Chairman may recommend tenure for faculty appointed at the rank of Associate Professor or Professor in any of the tenure track pathways during the third year of faculty service, so that full tenure rights will begin with the fourth appointment. The range of tenure review consideration may, however, on occasion extend up to the maximum period of probationary service. Upon the recommendation of the department chairperson, after consultation with the departmental faculty and the concurrence of the

dean, chief academic officer, and chief executive officer of the campus, new appointees at the rank of associate professor, professor, distinguished professor, or University professor may be granted immediate tenure.

Tenure generally will not be awarded faculty at the Assistant Professor rank, and the seventh appointment will be a terminal appointment. In special circumstances, the Chairman may request special tenure consideration for such a faculty member during the seventh academic year.

Guidelines regarding tenure are found in Board Policy 405.1 (revised 1/1/81), included in the UAMS Faculty Handbook, 1996 edition, pp F.10-F.13.

The academic year begins July 1 and ends on June 30. Appointments made effective January 1 or later are considered one-half year or less for purposes of probationary year accrual.

I:\Dean\Hillman\P&TInformation\P&Tcriteria 7-16-97