Declaration of Candidacy for Senior Level Promotions Non-Tenure Track (NTT) 2024 - 2025, effective January 1, 2025
To be completed by the Candidate and the Department Chair/Director

Are you being considered for:

☐ Promotion to Associate Professor (NTT); ☐ Promotion to Professor (NTT)

To be included in the upcoming promotion cycle, all candidates for senior level promotion in the School of Medicine must submit this form by **January 6, 2024** to facaffrs@case.edu with the following subject line:
Candidate Name_Department_Campus (i.e. UH, SOM, CCLCM, VA, MHMC)_NTT_Jan 2025

Please note that all promotion materials will be submitted through Interfolio for all SOM/UH/VA candidates.
You will receive instructions following the submission of this form. **The department must submit the complete promotion packet** to facaffrs@case.edu or via Interfolio (SOM, UH, VA) before **February 28, 2024**

1. Promotion Candidate: __________________________ Credentials: __________________________
2. Preferred Pronoun: __________________________
3. Candidate Email: __________________________
4. Department: __________________________
5. Department Chair: __________________________ Credentials: __________________________
   Chair email: __________________________ Chair phone number: __________________________
6. Department Administrator: __________________________ Title: __________________________
   Administrator email: __________________________ Administrator phone number: __________________________
7. Secondary Department (if applicable):
8. Secondary Department Chair: __________________________
   Secondary Department Chair email: __________________________ Credentials: __________________________
9. Is the candidate interested in promotion in their secondary department? (If yes, promotion materials must include a nomination letter from the department chair of the secondary department) ☐ Yes ☐ No ☐ N/A
10. Candidate’s Current Academic Rank: ☐ Assistant Professor ☐ Associate Professor
11. Is the department/hospital supportive of the candidate for promotion? ☐ Yes ☐ No
12. If Research-focused Non-Tenure Track: Do you identify as a team scientist? ☐ Yes ☐ No ☐ N/A
13. What is your Primary Area of Excellence? (pick one only) ☐ Teaching ☐ Service ☐ Research
14. What additional area have you made acceptable contributions in? (pick one only)
   ☐ Teaching ☐ Service ☐ Research

Please read each statement and sign below acknowledging your understanding and agreement of the promotion process requirements of the SOM at CWRU.

✓ My CV is current, dated, and formatted according to the School of Medicine template;
✓ If there are significant accomplishments to add, I will email updated CVs to Faculty Affairs throughout the review cycle and name the file “Updated CV_Candidate Name_Date”;
✓ The submitted Teaching Evaluations do not include any other faculty members’ evaluations;
✓ All external referees submitted meet the definition of an “arm’s length” reviewer;
✓ All referees have been selected according to instructions and I indicate which referees I selected;
✓ I will not communicate directly with any of my referees regarding the promotion process; and
✓ I understand that all updates regarding my promotion will be communicated to me by my Department Chair and they are responsible for providing timely updates to me.
✓ Final decisions regarding promotions will not be made until December 2024 and will be effective January 1, 2025.

Promotion Candidate Name: __________________________ Date: __________________________
Promotion Candidate Signature: __________________________
Department Chair Name: __________________________ Date: __________________________
Department Chair Signature: __________________________