MEMO TO: Dr. Colin Potts

FROM: Faculty Name

 Chair, Department of xxxx

DATE: Month Day, Year

RE: Emeritus Status for Professor *FIRSTNAME LASTNAME*

On *DATE*, the Professors and Associate Professors (*if applicable:* including/excluding NTT faculty) of the Department of XXXX voted (xx-x) to recommend that Professor *FIRSTNAME LASTNAME* be granted the title of *TITLE EMERITUS* of (*DISCIPLINE*) upon his/her retirement, effective September 1 *(or March 1)*, xxxx.  The department’s letter of recommendation (attached) details Professor *LASTNAME*’s accomplishments that justify the title of *TITLE EMERITUS* of (*DISCIPLINE*).

Recommend/Not Recommend

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(type name of VPD here; sign above.) Date
Vice Provost and Dean

Recommend/Not Recommend

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Colin Potts Date

Provost and Executive Vice Chancellor for Academic Affairs

Approve/Not Approve

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Chancellor