Faculty of Graduate Studies Membership Nomination Form

In addition to this form, you must submit an electronic copy of your curriculum vitae (in IQAP format) and a brief statement describing how you meet the criteria for FGS membership.

Faculty Member: **Home Department:**

Phone: **Email:**

Graduate Program Membership Requested:

Faculty status (please check one):

☐ **Faculty member -** Full-time, tenure or tenure-track **faculty member** of Lakehead University.

☐ **External Adjunct Professor** - Nominee is not a faculty member of Lakehead University and has been granted External Adjunct Professor Status by Senate and the Board of Governors

Expiry Date: _____

☐ **Internal Adjunct Professor** - Nominee is a faculty member of Lakehead University or NOSM, but not a member of this graduate program and has been granted Internal of Adjunct Professor Status by Senate and the Board of Governors.

Expiry Date: _____

☐ **LTA -** Length of LTA? _____

☐ **Emeritus Professor**

Membership Requested: **This is a RENEWAL** ☐

☐ **Master's Non-Core** ☐ **Doctoral Non-Core**

☐ **Master's Core** ☐ **Doctoral Core**

Successful applicants of will be those which document achievement in meeting the criteria for membership as outlined in the Senate approved "Criteria and Procedures" policy. Committees judging applicants typically place weight on the following:

- Evidence of adequate involvement in graduate student supervision, either as supervisor, co-supervisor, or committee member, commensurate with programmatic norms.
- Evidence of adequate involvement in teaching at the graduate level.
- Evidence of peer recognition of scholarly or scientific achievement at regional, national, and/or international levels by objective, and (where possible) qualitative measures (e.g. Tri-council grants or other national or international grants of funding successes; awards or titles).
- Peer-review of contributions of research, scholarly activity, creative-performance, as exemplified through refereed or critically judged publication as per the norm of the discipline.

Faculty Member: _____ Date: _____

Graduate Coordinator of Program Requested: _____ Date: _____

Faculty Dean of Program Requested: _____ Date: _____