RESET FORM

UNIVERSITY of MARYLAND
SCHOOL OF MEDICINE

SECONDARY PROMOTION REQUEST
Volunteer, non-tenure track

Candidate's Name: _____

Secondary Department: Choose One

Requested Rank: Choose One (secondary)

Primary Department: Choose One

Effective date: _____ to _____
(leave end date blank if primary appt. is at UMSOM)

Ongoing activities in secondary department:

Appointment as a secondary faculty member at the University of Maryland School of Medicine requires meaningful, on-going contributions to one or more of the School's missions. If your primary appointment is in the School of Medicine, the expiration of this secondary appointment will coincide with the expiration of your primary faculty appointment. Earlier termination is at the discretion of your secondary department Chair.

Requested: _____ _____
Secondary Department Chairperson or Designee Date

Approved: _____ _____
Dean or Designee Date