Cover Sheet for Research Appointment/Reappointment Request (This form will be retained at the Dean's Office)								
Department			Candidate's Name		Appointment Title			
UCR Fund Source		,	Appt. % (Include % o	of effort for WOS)	Salary at 100% \$		Mo. (Indicate WOS Ann. if applicable)	
Candidate	s Job Responsibili	ties:			1			
If future requests for reappointment are anticipated , explain for how long and the long-term goal for this candidate:								
If appointment is without salary or appointment percent is < 100 , describe other non-UC sources of support/income:								
If PI is supplementing a Without Salary appointment with UC salary , explain the reason for the supplement:								
If you anticipate any changes in the % of appointment and/or level of PI support over the term of the appointment proposed, explain here:								
GRADUATE STUDENT INFORMATION (Optional if PI is in a Research Title								
#Current	graduate students	As MS Advi	301	PhD Ivisor	As MS Co-Advisor		As PhD Co-Advisor	
please explain why graduate students can't be hired instead of the proposed candidate and what effort you are making to attract future graduate students to your research program. How will hiring this individual help or enhance your graduate student activities? (Optional if PI is in a Research Title)								
Principal Investigator (PI):				PI Signature	PI Signature:			
			intment benefit th				is in a Research Title)	
Department Chair/Director (print) Department Chair/Director Signature Below this line is for Dean's Office use only								
Comments:		Вего	w this line is i	or Dean's Office	te use only			
	e or Outcome of Dept.	•	·	ulted:				
Number of currently supported research appointments:					Number of current WOS appointments			
Postdocs	Jr. Specialists \	isiting Titles/	Other Non-Visiting	WOS Jr.Specialists	WOS Jr.Specialists with Supplements	Visiting Titles	Other Non-Visiting Titles	
BCOE Dean's Office	ce Staff Name (Print)	BCOE Dean's Offi	ice Staff Signature	Date Janna Le Blanc		Pat Hartney		