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| **Name:**  |
| **College:** |
| **Work Phone:** |
| **Home Phone:** |
| **Email:** |
| **Discipline:** |
| **Tenured faculty member: 🞏 Yes 🞏 No** |
| **Do you have local academic senate leadership experience? 🞏 Yes 🞏 No** |
| **If yes, please provide positions and dates.** |
| **Date** | **Position** | **Date** | **Position** |
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| **Do you have statewide academic senate leadership experience? 🞏 Yes 🞏 No** |
| **If yes, please provide positions and dates.** |
| **Date** | **Position** | **Date** | **Position** |
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|  |  |  |  |
| **Do you have leadership experience in an academic environment: 🞏 Yes 🞏 No** |
| **If yes, please provide positions and dates.**  |
| **Date** | **Position** | **Date** | **Position** |
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