



**GRADUATE FULL-TIME FACULTY APPROVAL**

This application is used to approve full-time faculty to teach in graduate programs. The nominator should complete and submit this form along with the nominees CV to the Graduate Dean via email to: [emorote@jjay.cuny.edu](mailto:emorote@jjay.cuny.edu). The completed application must be submitted by the 1st of each month in order to be included on the Council on Graduate Studies agenda.

Date: \_\_\_\_\_

Semester: \_\_\_\_\_

Year: \_\_\_\_\_

**Nominator**

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Email Address: \_\_\_\_\_

Graduate Program: \_\_\_\_\_

Graduate Program Director: \_\_\_\_\_

**Nominee**

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Email Address: \_\_\_\_\_

\_\_\_\_\_ (Name of Nominee) is nominated by \_\_\_\_\_ (name of nominator) to teach in \_\_\_\_\_ (Graduate program).