



THE UNIVERSITY OF ARIZONA
Graduate College

Graduate Faculty Dean's Authorization Form

Please enter the information about the person who needs Graduate Faculty Membership:

EMPLID	
NETID	
Proposed Grad Faculty Member's Last Name	
Proposed Grad Faculty Member's First Name	

Please enter the Requestor's information:

EMPLID	
NETID	
Requestor's Last Name	
Requestor's First Name	
Requestor's Title/Position	
Requestor's Program/Department	
Proposed Grad Faculty Member's College Dean/Dean's Designee	

I authorize this faculty member's appointment as a Member of the Graduate Faculty per the Graduate Program Criteria created in accordance with section 3.1.1. of the Graduate Faculty Policy (<https://grad.arizona.edu/policies/academic-policies/graduate-faculty-policy>).

Dean/Dean's Designee approving this request: _____

Once this form is signed, please proceed to the next step in the approval process which is to complete the Manager Self Service Request (MSS) in UAccess Employee. Instructions can be found here: <https://arizona.app.box.com/v/grad-gsas-GradFac-MS-instr>

Attach this form to the MSS request. It does NOT need to be sent to the Graduate College.