COLLEGE OF HEALTH SCIENCES

Criteria and Standards for Promotion – Non-Tenure Track

The standards for promotion in the College of Health Sciences (COHS) at Sam Houston State University (SHSU) reflect a commitment to academic excellence. Each faculty member in the COHS is expected to demonstrate excellence in the areas of teaching, and service, and maintain currency in the appropriate academic field through scholarship and/or engaged practice. The standards set forth in this document are consistent with, and subservient to SHSU Academic Policy and the Texas State University System Rules and Regulations.

There are four academic units in the COHS: (a) the Department of Human Sciences, (b) the Department of Kinesiology, (c) the Department of Public Health, and (d) the School of Nursing. Each unit is responsible for the application of the criteria and standards for promotion. Application of the criteria and standards must be consistent with prevailing standards of excellence in each of the unit’s respective disciplines.

Expectations

Non-tenure track faculty members’ primary area of evaluation is teaching. As described in Academic Policy Statement (APS) 890301 - Hiring, Evaluation, Promotion, and Merit for Non-Tenure Track Faculty, Section 3.03, “Workload assignments for all non-tenure track faculty with respect to teaching or librarianship, as well as scholarly/creative activities and service, where applicable, shall be documented in their annual or semester departmental offer letter, expressed as the number of workload credits assigned for each in accordance with APS 790601, Faculty Workload.” Non-tenure track faculty members should work with their Department Chair / School Director to establish expectations for the range of responsibilities their position carries.

Department Promotion Advisory Committee (DPAC)

As reflected in APS 890301, Section 5.04, “the chair shall review the portfolio and use a departmental faculty review advisory committee consisting of a minimum of four faculty members with at least 50% non-tenure track faculty members. Should the department not have a sufficient number of non-tenure track faculty members, additional non-tenure track faculty members shall be obtained from outside the department. Preference is for faculty within the College of Health Sciences. The department chair/school director shall elect a committee chair to convene the review and write a summary of the committee’s recommendation on promotion to the department chair/school director. The faculty member shall be copied on the committee’s recommendation. In the case of the College of Health Sciences, these review committees are defined as a Department Promotion Advisory Committee (DPAC).

The DPAC is comprised of at least 50% non-tenure track faculty members at the rank, or higher, at which the candidate is seeking promotion. For example, a Clinical Assistant Professor seeking promotion to Clinical Associate Professor will be evaluated by all members of the department/school
that hold the rank of Clinical Associate Professor, Clinical Full Professor, Associate Professor of Practice, Professor of Practice, Senior Lecturer, Senior Clinical Lecturer, Associate Research Professor, Research Professor, Associate Professor (tenured), or Full Professor (tenured). Those non-tenure track faculty seeking promotion to Clinical Professor, Professor of Practice, or Research Professor will be evaluated only by faculty holding the rank of Clinical Full Professor, Professor of Practice, Research Professor, or Full Professor (tenured).

As stated in APS 890301, Section 5.04, “the department chair shall communicate in writing to the dean a recommendation regarding promotion no later than May 1. The dean shall then make a decision and document it in writing no later than May 15. The faculty member shall be copied on the chair’s recommendation and dean’s decision.”

Promotion

Faculty promotion is marked by sustained, high level performance, leadership, and continuous improvement over time at the current rank. Candidates for promotion must demonstrate a professional commitment to sustained productivity as appropriate to the particular appointment, as well as a commitment to the mission of SHSU. The process for reviewing non-tenure track faculty portfolios for promotion will follow the procedures established in APS 890301, Sections 5.03 - 5.05.

As stated in APS 890301, Section 5.01, the following promotion pathways shall apply (where applicable):

- a. Lecturer to Senior Lecturer
- b. Lecturer of Practice to Senior Lecturer of Practice
- c. Clinical Lecturer to Senior Clinical Lecturer
- d. Clinical Assistant Professor to Clinical Associate Professor to Clinical Professor
- e. Assistant Professor of Practice to Associate Professor of Practice to Professor of Practice
- f. Assistant Research Professor to Associate Research Professor to Research Professor

GUIDELINES FOR PROMOTION

For Award of Promotion from Lecturer to Senior Lecturer and Lecturer of Practice to Senior Lecturer of Practice

Per APS 890301, Section 5.02(a), “the candidate must have served at least five (5) years in the rank of Lecturer or Lecturer of Practice. During these years, the candidate must have demonstrated sustained excellence based on department and college criteria for teaching/librarianship and/or service, in accordance with the faculty member’s annual departmental offer letters. Excellence in any one area will not compensate for lack of sustained effectiveness in other assigned areas.” Guidelines for consideration for promotion to Senior Lecturer/Senior Lecturer of Practice include:

Teaching

Quality teaching, with diversity in styles, methods, and settings is central to the COHS mission. As a craft, teaching is multifaceted. Neither a formula nor any single piece of evidence can define something as complex and dynamic as successful teaching. COHS faculty and academic administrators believe that the best way to evaluate teaching is to create a narrative synthesizing evidence from a variety of sources. The evaluation of teaching should be holistic, drawing from both quantitative and qualitative evidence.
that demonstrates a sustained pattern of performance. Non-tenure track faculty candidates for promotion will develop a teaching narrative addressing their approach, preparation, and performance of the practice of teaching, including outcomes. A candidate will address their strengths as a teacher, areas needing improvement, results of student, peer, and chair evaluations, how these results have enhanced teaching, and any relevant information deemed important for documenting and supporting teaching effectiveness. In the case of teaching scores below the departmental, college, or university average, the candidate should address these occurrences in the narrative, taking care to note problems, actions to rectify them, and extenuating circumstances that may have led to lower than expected scores. In the case of higher scores, the candidate should likewise identify strengths to retain, successful teaching strategies, training that contributed to success, and fortuitous circumstances.

Student evaluation scores/ratings are generally expected to show growth or maintenance as appropriate over time. While global ratings from the student evaluation instrument provide a good overview of teaching effectiveness, the DPAC members, department chair, and dean should consider other data included in the evaluation system. In addition, information about course characteristics (e.g., class size, required/elective, lower/upper division) should be considered when reviewing evaluation results.

While student evaluations are a valuable source of information, scores should be interpreted in the context of other materials documenting pedagogical achievement. Per APS 890301, Section 4.01, “No more than 50% of the teaching evaluation may be based on surveys of student perceptions of teaching.” The department chair, through annual evaluation of the candidate during the probationary period, will address additional evidence of teaching effectiveness. Faculty are in a unique position to evaluate and provide specific feedback on aspects of teaching that are beyond the expertise of students, and peer evaluations are a key component of the teaching evaluation. A candidate has the right to nominate to the chair/director the individual(s) providing the peer evaluation. However, the chair/director will make the final selection of the reviewer(s). The evaluator(s) will use the department’s/school’s peer evaluation form.

Demonstration of effective pedagogy may also include: contributions to curriculum; participation in curriculum planning, course development, or revisions; innovative use of technologies or teaching strategies; recognition of teaching expertise in the form of awards and/or honors; implementation of service-learning or Academic Community Engagement (ACE) designated coursework; participation in workshops or other professional development intended to enhance teaching; evidence of student involvement (e.g., advising, mentorship, student organizations, Honors projects, and other student activities connected with teaching and mentorship); and pedagogical publications and/or presentations that demonstrate and provide evidence of teaching effectiveness.

**Scholarly Activity and Engaged Practice**

The importance of scholarly activity in academia is two-fold: discovery and practice. Non-tenure track faculty should consult with their chair/director for guidance on the types of activities that fulfill their contractual requirements, and therefore serve as the basis upon which a candidate is evaluated for promotion.

The scholarship of discovery, whereby new knowledge is created and disseminated, is the norm. Scholarship focused on engaged practice is less prevalent, and often takes the form of consulting, white papers, creative endeavors, internship/clinical placement development, and volunteer service in community organizations that require professional expertise. Participation in workshops and/or
conferences that demonstrate continuing professional education to remain current in one’s field are also encouraged, as are providing clinical education units to one’s field. Other examples of engaged practice include actual clinical or field-based practice, involvement in quality improvement projects, development of best practice guidelines, and more generally, leading in practice change. These forms of activity are valuable and serve the same purpose for the individual, which is to maintain currency in one’s chosen academic field.

The evaluation of scholarly activity and engaged practice, like that of teaching, should be holistic, drawing from a variety of sources of evidence that reflects a sustained pattern of performance. COHS faculty and academic administrators believe the best way to evaluate scholarly activity is through a narrative addressing a candidate’s accomplishments and progress related to scholarship (both traditional and creative), and/or engaged practice activity. Within the narrative, candidates should describe their activity in relation to the discipline; progress in initiating and completing projects; methodological approaches to scholarship; consulting efforts; professional development at workshops or seminars; works in progress; and self-evaluation of scholarship and/or engaged practice. Sources contributing to a narrative include but may not be limited to: (1) traditional forms of scholarship, such as peer-reviewed scholarly publications (including articles, books and chapters, and monographs), published conference proceedings, and presentations at international, national, state, and regional conferences; (2) creative scholarship, such as visual essays, demonstrations/displays, design portfolios, commissioned works, and exhibitions; and (3) engaged practice examples, including presentations of clinical education hours/units, invited publications, published white papers, external and internal grants, consulting contracts, clinical or field practice and/or evidence of leadership in practice change; certificates of completion, licensures and other professional credentials within the field, advanced training, and other indicators addressed in this section. It should be noted that the examples provided above are not exhaustive and non-tenure track faculty members are encouraged to visit with their Chair / Director and/or the COHS Dean should there be a question about a faculty member’s cited example(s) of scholarship.

In summary, the body of work is expected to show that the overall composite of the candidate’s scholarly or practice activity is substantial, balanced, and shows future promise for continuation.

**Service**

Professional service is essential to the success of each department/school and the COHS as a whole. As in the case of teaching, and scholarly activity, the faculty member should include a narrative that explains the kinds of service in which they have been involved and the significance of their involvement. While service takes many forms and varies by department/school, the candidate must have demonstrated sustained involvement in service to the department, college, university, profession, and/or community. Evidence of involvement may include, but not be limited, to: organization of professional conferences, seminars, workshops, or short courses (continuing professional education); leadership in appropriate professional organizations; a record of service to the department, college, university, profession, and/or community; and significant contribution to self-studies/accreditation reports. Service in healthcare agencies in which faculty make valuable contributions in clinical settings through committee leadership/membership and governance work is also valued. Higher weighting should be assigned to service as the leader or significant contributor to program accreditation self-study and related reports.
For Award of Promotion from Clinical Lecturer to Senior Clinical Lecturer

Per APS 890301, Section 5.02(b), “the candidate must have served at least five (5) years in the rank of Clinical Lecturer of Practice. During these years, the candidate must have demonstrated sustained excellence based on department and college criteria for teaching/librarianship, scholarly/creative activities, and/or service, in accordance with the faculty member’s annual departmental offer letters. Excellence in any one area will not compensate for lack of sustained effectiveness in other assigned areas.” Guidelines for consideration for promotion to Senior Clinical Lecturer include:

Teaching

Quality teaching, with diversity in styles, methods, and settings is central to the COHS mission. As a craft, teaching is multifaceted. Neither a formula nor any single piece of evidence can define something as complex and dynamic as successful teaching. COHS faculty and academic administrators believe that the best way to evaluate teaching is to create a narrative synthesizing evidence from a variety of sources. The evaluation of teaching should be holistic, drawing from both quantitative and qualitative evidence that demonstrates a sustained pattern of performance. Non-tenure track faculty candidates for promotion will develop a teaching narrative addressing their approach, preparation, and performance of the practice of teaching, including outcomes. A candidate will address their strengths as a teacher, areas needing improvement, results of student, peer, and chair evaluations, how these results have enhanced teaching, and any relevant information deemed important for documenting and supporting teaching effectiveness. In the case of teaching scores below the departmental, college, or university average, the candidate should address these occurrences in the narrative, taking care to note problems, actions to rectify them, and extenuating circumstances that may have led to lower than expected scores. In the case of higher scores, the candidate should likewise identify strengths to retain, successful teaching strategies, training that contributed to success, and fortuitous circumstances.

Student evaluation scores/ratings are generally expected to show growth or maintenance as appropriate over time. While global ratings from the student evaluation instrument provide a good overview of teaching effectiveness, the DPAC members, department chair, and dean should consider other data included in the evaluation system. In addition, information about course characteristics (e.g., class size, required/elective, lower/upper division) should be considered when reviewing evaluation results.

While student evaluations are a valuable source of information, scores should be interpreted in the context of other materials documenting pedagogical achievement. Per APS 890301, Section 4.01, “No more than 50% of the teaching evaluation may be based on surveys of student perceptions of teaching.” The department chair, through annual evaluation of the candidate during the probationary period, will address additional evidence of teaching effectiveness. Faculty are in a unique position to evaluate and provide specific feedback on aspects of teaching that are beyond the expertise of students, and peer evaluations are a key component of the teaching evaluation. A candidate has the right to nominate to the chair/director the individual(s) providing the peer evaluation. However, the chair/director will make the final selection of the reviewer(s). The evaluator(s) will use the department’s/school’s peer evaluation form.

Demonstration of effective pedagogy may also include: contributions to curriculum; participation in course development or revisions; innovative use of technologies or teaching strategies; recognition of teaching expertise in the form of awards and/or honors; implementation of service-learning or Academic Community Engagement (ACE) designated coursework; participation in workshops or other
professional development intended to enhance teaching; and pedagogical publications and/or presentations that demonstrate and provide evidence of teaching effectiveness.

Scholarly Activity and Engaged Practice

The importance of scholarly activity in academia is two-fold: discovery and practice. Non-tenure track faculty should consult with their chair/director for guidance on the types of activities that fulfill their contractual requirements, and therefore serve as the basis upon which a candidate is evaluated for promotion.

The scholarship of discovery whereby new knowledge is created and disseminated is the norm. Scholarship focused on engaged practice is less prevalent, and often takes the form of consulting, white papers, creative endeavors, internship/clinical placement development, and volunteer service in community organizations that require professional expertise. Participation in workshops and/or conferences that demonstrate continuing professional education to remain current in one’s field are also encouraged, as are providing clinical education units to one’s field. Other examples of engaged practice include actual clinical or field-based practice, involvement in quality improvement projects, development of best practice guidelines, and more generally, leading in practice change. These forms of activity are valuable and serve the same purpose for the individual, which is to maintain currency in one’s chosen academic field.

The evaluation of scholarly activity and engaged practice, like that of teaching, should be holistic, drawing from a variety of sources of evidence that reflects a sustained pattern of performance. COHS faculty and academic administrators believe the best way to evaluate scholarly activity is through a narrative addressing a candidate’s accomplishments and progress related to scholarship (both traditional and creative), and/or engaged practice activity. Within the narrative, candidates should describe their activity in relation to the discipline; progress in initiating and completing projects; methodological approaches to scholarship; consulting efforts; professional development at workshops or seminars; works in progress; and self-evaluation of scholarship and/or engaged practice. Sources contributing to a narrative include but may not be limited to: (1) traditional forms of scholarship, such as peer-reviewed scholarly publications (including articles, books and chapters, and monographs), published conference proceedings, and presentations at international, national, state, and regional conferences; (2) creative scholarship, such as visual essays, demonstrations/displays, design portfolios, commissioned works, and exhibitions; and (3) engaged practice examples, including presentations of clinical education hours/units, invited publications, published white papers, external and internal grants, consulting contracts, clinical or field practice and/or evidence of leadership in practice change; certificates of completion, licensures and other professional credentials within the field, advanced training, and other indicators addressed in this section. It should be noted that the examples provided above are not exhaustive and non-tenure track faculty members are encouraged to visit with their Chair / Director and/or the COHS Dean should there be a question about a faculty member’s cited example(s) of scholarship.

In summary, the body of work is expected to show that the overall composite of the candidate’s scholarly or practice activity is substantial, balanced, and shows future promise for continuation.
Service

Professional service is essential to the success of each department/school and the COHS as a whole. As in the case of teaching, and scholarly activity, the faculty member should include a narrative that explains the kinds of service in which they have been involved and the significance of their involvement. While service takes many forms and varies by department/school, the candidate must have demonstrated sustained involvement in service to the department, college, university, profession, and/or community. Evidence of involvement may include, but not be limited, to: organization of professional conferences, seminars, workshops, or short courses (continuing professional education); leadership in appropriate professional organizations; a record of service to the department, college, university, profession, and/or community; and significant contribution to self-studies/accreditation reports. Service in healthcare agencies in which faculty make valuable contributions in clinical settings through committee leadership/membership and governance work is also valued. Higher weighting should be assigned to service as the leader or significant contributor to program accreditation self-study and related reports.

For Award of Promotion from Clinical Assistant Professor to Clinical Associate Professor

Per APS 890301, Section 5.02(c), “the candidate must have served at least six (6) consecutive years in the rank of Clinical Assistant Professor. During these years, the candidate must have demonstrated excellence based on department and college criteria for teaching/librarianship, scholarly/creative activities, and/or service, in accordance with the faculty member’s annual departmental offer letters. Excellence in any one area will not compensate for lack of sustained effectiveness in other assigned areas.” Guidelines for consideration for promotion to Clinical Associate Professor include:

Teaching

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Student evaluation scores/ratings are generally expected to show growth or maintenance as appropriate over time. While global ratings from the student evaluation instrument provide a good overview of teaching effectiveness, the DPAC members, department chair, and dean should consider other data included in the evaluation system. In addition, information about course characteristics (e.g., class size, required/elective, lower/upper division) should be considered when reviewing evaluation results.
While student evaluations are a valuable source of information, scores should be interpreted in the context of other materials documenting pedagogical achievement. Per *APS 890301*, Section 4.01, “No more than 50% of the teaching evaluation may be based on surveys of student perceptions of teaching.” The department chair, through annual evaluation of the candidate during the probationary period, will address additional evidence of teaching effectiveness. Faculty are in a unique position to evaluate and provide specific feedback on aspects of teaching that are beyond the expertise of students, and peer evaluations are a key component of the teaching evaluation. A candidate has the right to nominate to the chair/director the individual(s) providing the peer evaluation. However, the chair/director will make the final selection of the reviewer(s). The evaluator(s) will use the department’s/school’s peer evaluation form.

Demonstration of effective pedagogy may also include: contributions to curriculum; participation in course development or revisions; innovative use of technologies or teaching strategies; recognition of teaching expertise in the form of awards and/or honors; implementation of service-learning or Academic Community Engagement (ACE) designated coursework; participation in workshops or other professional development intended to enhance teaching; evidence of student involvement (e.g., advising, mentorship, student organizations, Honors projects, and other student activities connected with teaching and mentorship); and pedagogical publications and/or presentations that demonstrate and provide evidence of teaching effectiveness.

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The scholarship of discovery whereby new knowledge is created and disseminated is the norm. Scholarship focused on engaged practice is less prevalent, and often takes the form of consulting, white papers, creative endeavors, internship/clinical placement development, and volunteer service in community organizations that require professional expertise. Participation in workshops and/or conferences that demonstrate continuing professional education to remain current in one’s field are also encouraged, as are providing clinical education units to one’s field. Other examples of engaged practice include actual clinical or field-based practice, involvement in quality improvement projects, development of best practice guidelines, and more generally, leading in practice change. These forms of activity are valuable and serve the same purpose for the individual, which is to maintain currency in one’s chosen academic field.

The evaluation of scholarly activity and engaged practice, like that of teaching, should be holistic, drawing from a variety of sources of evidence that reflects a sustained pattern of performance. COHS faculty and academic administrators believe the best way to evaluate scholarly activity is through a narrative addressing a candidate’s accomplishments and progress related to scholarship (both traditional and creative), and/or engaged practice activity. Within the narrative, candidates should describe their activity in relation to the discipline; progress in initiating and completing projects; methodological approaches to scholarship; consulting efforts; professional development at workshops or seminars; works in progress; and self-evaluation of scholarship and/or engaged practice. Sources contributing to a narrative include but may not be limited to: (1) traditional forms of scholarship, such as peer-reviewed publications; (2) engagement in service-learning or Academic Community Engagement (ACE) designated coursework; (3) participation in workshops or other professional development activities intended to enhance teaching; (4) evidence of student involvement (e.g., advising, mentorship, student organizations, Honors projects, and other student activities connected with teaching and mentorship); and (5) pedagogical publications and/or presentations that demonstrate and provide evidence of teaching effectiveness.
scholarly publications (including articles, books and chapters, and monographs), published conference proceedings, and presentations at international, national, state, and regional conferences; (2) creative scholarship, such as visual essays, demonstrations/displays, design portfolios, commissioned works, and exhibitions; and (3) engaged practice examples, including presentations of clinical education hours/units, invited publications, published white papers, external and internal grants, consulting contracts, clinical or field practice and/or evidence of leadership in practice change; certificates of completion, licensures and other professional credentials within the field, advanced training, and other indicators addressed in this section. It should be noted that the examples provided above are not exhaustive and non-tenure track faculty members are encouraged to visit with their Chair / Director and/or the COHS Dean should there be a question about a faculty member’s cited example(s) of scholarship.

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For Promotion from Clinical Associate Professor to Clinical Professor

Per APS 890301, Section 5.02(d), “the candidate must have served at least five (5) years in the rank of Clinical Associate Professor. During these years, the candidate must have demonstrated excellence and leadership based on department and college criteria for teaching/librarianship, scholarly/creative activities, and/or service, in accordance with the faculty member’s annual departmental offer letters. Excellence in any one area will not compensate for lack of sustained excellence in other assigned areas.” Guidelines for consideration for promotion to Clinical Professor include:

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For Award of Promotion from Assistant Professor of Practice to Associate Professor of Practice

Per APS 890301, Section 5.02(e), "the candidate must have served at least six (6) years in the rank of Assistant Professor of Practice. During these years, the candidate must have demonstrated sustained excellence based on department and college criteria for teaching/librarianship and/or service, in accordance with the faculty member’s annual departmental offer letters. Excellence in any one area will not compensate for lack of sustained effectiveness in other assigned areas.” Guidelines for consideration for promotion to Associate Professor of Practice include:

**Teaching**

Quality teaching, with diversity in styles, methods, and settings is central to the COHS mission. As a craft, teaching is multifaceted. Neither a formula nor any single piece of evidence can define something as complex and dynamic as successful teaching. COHS faculty and academic administrators believe that the best way to evaluate teaching is to create a narrative synthesizing evidence from a variety of sources. The evaluation of teaching should be holistic, drawing from both quantitative and qualitative evidence that demonstrates a sustained pattern of performance. Non-tenure track faculty candidates for promotion will develop a teaching narrative addressing their approach, preparation, and performance of the practice of teaching, including outcomes. A candidate will address their strengths as a teacher, areas needing improvement, results of student, peer, and chair evaluations, how these results have enhanced teaching, and any relevant information deemed important for documenting and supporting teaching effectiveness. In the case of teaching scores below the departmental, college, or university average, the candidate should address these occurrences in the narrative, taking care to note problems, actions to rectify them, and extenuating circumstances that may have led to lower than expected scores. In the case of higher scores, the candidate should likewise identify strengths to retain, successful teaching strategies, training that contributed to success, and fortuitous circumstances.

Student evaluation scores/ratings are generally expected to show growth or maintenance as appropriate over time. While global ratings from the student evaluation instrument provide a good overview of teaching effectiveness, the DPAC members, department chair, and dean should consider other data included in the evaluation system. In addition, information about course characteristics (e.g., class size, required/elective, lower/upper division) should be considered when reviewing evaluation results.

While student evaluations are a valuable source of information, scores should be interpreted in the context of other materials documenting pedagogical achievement. Per APS 890301, Section 4.01, “No more than 50% of the teaching evaluation may be based on surveys of student perceptions of teaching.” The department chair, through annual evaluation of the candidate during the probationary period, will address additional evidence of teaching effectiveness. Faculty are in a unique position to evaluate and provide specific feedback on aspects of teaching that are beyond the expertise of students, and peer evaluations are a key component of the teaching evaluation. A candidate has the right to nominate to the chair/director the individual(s) providing the peer evaluation. However, the chair/director will make the final selection of the reviewer(s). The evaluator(s) will use the department’s/school’s peer evaluation form.

Demonstration of effective pedagogy may also include: contributions to curriculum; participation in course development or revisions; innovative use of technologies or teaching strategies; recognition of teaching expertise in the form of awards and/or honors; implementation of service-learning or Academic Community Engagement (ACE) designated coursework; participation in workshops or other
professional development intended to enhance teaching; evidence of student involvement (e.g., advising, mentorship, student organizations, Honors projects, and other student activities connected with teaching and mentorship); and pedagogical publications and/or presentations that demonstrate and provide evidence of teaching effectiveness.

**Scholarly Activity and Engaged Practice**

The importance of scholarly activity in academia is two-fold: discovery and practice. Non-tenure track faculty should consult with their chair/director for guidance on the types of activities that fulfill their contractual requirements, and therefore serve as the basis upon which a candidate is evaluated for promotion.

The scholarship of discovery whereby new knowledge is created and disseminated is the norm. Scholarship focused on engaged practice is less prevalent, and often takes the form of consulting, white papers, creative endeavors, internship/clinical placement development, and volunteer service in community organizations that require professional expertise. Participation in workshops and/or conferences that demonstrate continuing professional education to remain current in one’s field are also encouraged, as are providing clinical education units to one’s field. Other examples of engaged practice include actual clinical or field-based practice, involvement in quality improvement projects, development of best practice guidelines, and more generally, leading in practice change. These forms of activity are valuable and serve the same purpose for the individual, which is to maintain currency in one’s chosen academic field.

The evaluation of scholarly activity and engaged practice, like that of teaching, should be holistic, drawing from a variety of sources of evidence that reflects a sustained pattern of performance. COHS faculty and academic administrators believe the best way to evaluate scholarly activity is through a narrative addressing a candidate’s accomplishments and progress related to scholarship (both traditional and creative), and/or engaged practice activity. Within the narrative, candidates should describe their activity in relation to the discipline; progress in initiating and completing projects; methodological approaches to scholarship; consulting efforts; professional development at workshops or seminars; works in progress; and self-evaluation of scholarship and/or engaged practice. Sources contributing to a narrative include but may not be limited to: (1) traditional forms of scholarship, such as peer-reviewed scholarly publications (including articles, books and chapters, and monographs), published conference proceedings, and presentations at international, national, state, and regional conferences; (2) creative scholarship, such as visual essays, demonstrations/displays, design portfolios, commissioned works, and exhibitions; and (3) engaged practice examples, including presentations of clinical education hours/units, invited publications, published white papers, external and internal grants, consulting contracts, clinical or field practice and/or evidence of leadership in practice change; certificates of completion, licensures and other professional credentials within the field, advanced training, and other indicators addressed in this section. It should be noted that the examples provided above are not exhaustive and non-tenure track faculty members are encouraged to visit with their Chair / Director and/or the COHS Dean should there be a question about a faculty member’s cited example(s) of scholarship.

In summary, the body of work is expected to show that the overall composite of the candidate’s scholarly or practice activity is substantial, balanced, and shows future promise for continuation.
**Service**

Professional service is essential to the success of each department/school and the COHS as a whole. As in the case of teaching, and scholarly activity, the faculty member should include a narrative that explains the kinds of service in which they have been involved and the significance of their involvement. While service takes many forms and varies by department/school, the candidate must have demonstrated sustained involvement in service to the department, college, university, profession, and/or community. Evidence of involvement may include, but not be limited, to: organization of professional conferences, seminars, workshops, or short courses (continuing professional education); leadership in appropriate professional organizations; a record of service to the department, college, university, profession, and/or community; and significant contribution to self-studies/accreditation reports. Service in healthcare agencies in which faculty make valuable contributions in clinical settings through committee leadership/membership and governance work is also valued. Higher weighting should be assigned to service as the leader or significant contributor to program accreditation self-study and related reports.

**For Promotion from Associate Professor of Practice to Professor of Practice**

Per APS 890301, Section 5.02(f), “the candidate must have served at least five (5) years in the rank of Associate Professor of Practice. During these years, the candidate must have demonstrated sustained excellence and leadership based on department and college criteria for teaching/librarianship and/or service, in accordance with the faculty member’s annual departmental offer letters. Excellence in any one area will not compensate for lack of sustained effectiveness in other assigned areas.” Guidelines for consideration for promotion to Clinical Professor of Practice include:

**Teaching**

Quality teaching, with diversity in styles, methods, and settings, is central to the COHS mission. As a craft, teaching is multifaceted. Neither a formula nor any single piece of evidence can define something as complex and dynamic as successful teaching. COHS faculty and academic administrators believe that the best way to evaluate teaching is to create a narrative synthesizing evidence from a variety of sources. The evaluation of teaching should be holistic, drawing from both quantitative and qualitative evidence that demonstrates a sustained pattern of performance. Non-tenure track faculty candidates for promotion will develop a teaching narrative addressing their approach, preparation, and performance of the practice of teaching, including outcomes. A candidate will address their strengths as a teacher, areas needing improvement, results of student, peer, and chair evaluations, how these results have enhanced teaching, and any relevant information deemed important for documenting and supporting teaching effectiveness. In the case of teaching scores below the departmental, college, or university average, the candidate should address these occurrences in the narrative, taking care to note problems, actions to rectify them and extenuating circumstances that may have led to lower than expected scores. In the case of higher scores, the candidate should likewise identify strengths to retain, successful teaching strategies, training that contributed to success, and fortuitous circumstances.

Student evaluation scores/ratings are generally expected to show growth or maintenance as appropriate over time. Per APS 890301, Section 4.01, “No more than 50% of the teaching evaluation may be based on surveys of student perceptions of teaching.” While global ratings from the student evaluation instrument provide a good overview of teaching effectiveness, the DPAC members, department chair/school director, and dean should consider other data included in the evaluation system. In addition,
information about course characteristics (e.g., class size, required/elective, lower/upper division) should be considered when reviewing evaluation results.

While student evaluations are a valuable source of information, scores should be interpreted in the context of other materials documenting pedagogical achievement. The department chair, through annual evaluation of the candidate during the probationary period, will address additional evidence of teaching effectiveness. Faculty are in a unique position to evaluate and provide specific feedback on aspects of teaching that are beyond the expertise of students, and peer evaluations are a key component of the teaching evaluation. A candidate has the right to nominate to the chair the individual/s providing the evaluation. The evaluator/s will use the department’s peer evaluation form.

Demonstration of effective pedagogy may also include: contributions to curriculum; participation in course development or revisions; innovative use of technologies or teaching strategies; recognition of teaching expertise in the form of awards and/or honors; implementation of service-learning or Academic Community Engagement (ACE) designated coursework; participation in workshops or other professional development intended to enhance teaching; evidence of student involvement (e.g., advising, mentorship, student organizations, Honors projects, and other student activities connected with teaching and mentorship); and pedagogical publications and/or presentations that demonstrate and provide evidence of teaching effectiveness.

**Scholarly Activity and Engaged Practice**
The importance of scholarly activity in academia is two-fold: discovery and practice. Non-tenure track faculty should consult with their chair/director for guidance on the types of activities that fulfill their contractual requirements, and therefore serve as the basis upon which a candidate is evaluated for promotion.

The scholarship of discovery whereby new knowledge is created and disseminated is the norm. Scholarship focused on engaged practice is less prevalent, and often takes the form of consulting, white papers, creative endeavors, internship/clinical placement development, and volunteer service in community organizations that require professional expertise. Participation in workshops and/or conferences that demonstrate continuing professional education to remain current in one’s field are also encouraged, as are providing clinical education units to one’s field. Other examples of engaged practice include actual clinical or field-based practice, involvement in quality improvement projects, development of best practice guidelines, and more generally, leading in practice change. These forms of activity are valuable and serve the same purpose for the individual, which is to maintain currency in one’s chosen academic field.

The evaluation of scholarly activity, like that of teaching, should be holistic, drawing from a variety of sources of evidence that reflects a sustained pattern of performance. COHS faculty and academic administrators believe that the best way to evaluate scholarly activity is through the creation of a narrative that addresses a candidate’s accomplishments and progress related to scholarship and/or engaged practice activity. Within the narrative, candidates should describe their activity in relation to the discipline; progress in initiating and completing projects; methodological approaches to scholarship; consulting efforts; professional development at workshops or seminars; works in progress; and self-evaluation of scholarship and/or engaged practice. Other examples of engaged practice include actual clinical or field-based practice, involvement in quality improvement projects, development of best practice guidelines, and more generally, leading in practice change. Sources contributing to a narrative include but may not be limited to: (1) traditional forms of scholarship, such as peer-reviewed scholarly
publications (including articles, books and chapters, and monographs), published conference proceedings, and presentations at international, national, state, and regional conferences; (2) creative scholarship, such as visual essays, demonstrations/displays, design portfolios, commissioned works, and exhibitions; and (3) engaged practice examples, including presentations of clinical education hours/units, invited publications, published white papers, external and internal grants, consulting contracts, clinical or field practice and/or evidence of leadership in practice change; certificates of completion, licensures and other professional credentials within the field, advanced training, and other indicators addressed in this section. It should be noted that the examples provided above are not exhaustive and non-tenure track faculty members are encouraged to visit with their Chair / Director and/or the COHS Dean should there be a question about a faculty member’s cited example(s) of scholarship.

In summary, the body of work is expected to show that the overall composite of the candidate’s scholarly or practice activity is substantial, balanced, and shows future promise for continuation.

**Service**

Professional service is essential to the success of each department/school and the COHS as a whole. As in the case of teaching and scholarly activity, the faculty member should include a narrative that explains the kinds of service in which they have been involved, and the significance of their involvement. While service takes many forms and varies by department/school, the candidate must have demonstrated sustained involvement in service to the department, college, university, profession, and/or community. Evidence of involvement may include, but not be limited to: organization of professional conferences, seminars, workshops, or short courses (continuing professional education); leadership in appropriate professional organizations; a record of service to the department, college, university, profession, and/or community; and significant contribution to self-studies/accreditation reports. Service in healthcare agencies in which faculty make valuable contributions in clinical settings through committee leadership/membership and governance work is also valued. Higher weighting should be assigned to service as the leader or significant contributor to program accreditation self-study and related reports.

For Award of Promotion from Assistant Research Professor to Associate Research Professor

Per **APS 890301**, Section 5.02(g), “the candidate must have served at least six (6) years in the rank of assistant research professor. During these years, the candidate must have demonstrated excellence based on department and college criteria for scholarly/creative activities, and where applicable, research student advising and service in accordance with the faculty member’s annual departmental offer letters. Excellence in research student advising or service, where applicable, will not compensate for lack of excellence in scholarly/creative activities.” Guidelines for consideration for promotion to Associate Research Professor include:

**Scholarly Activity and Engaged Practice**

The importance of scholarly activity in academia is two-fold: discovery and practice. Non-tenure track faculty should consult with their chair/director for guidance on the types of activities that fulfill their contractual requirements, and therefore serve as the basis upon which a candidate is evaluated for promotion.
The scholarship of discovery whereby new knowledge is created and disseminated is the norm. Scholarship focused on engaged practice is less prevalent, and often takes the form of consulting, white papers, creative endeavors, internship/clinical placement development, and volunteer service in community organizations that require professional expertise. Participation in workshops and/or conferences that demonstrate continuing professional education to remain current in one’s field are also encouraged, as are providing clinical education units to one’s field. Other examples of engaged practice include actual clinical or field-based practice, involvement in quality improvement projects, development of best practice guidelines, and more generally, leading in practice change. These forms of activity are valuable and serve the same purpose for the individual, which is to maintain currency in one’s chosen academic field.

The evaluation of scholarly activity should be holistic, drawing from a variety of sources of evidence that reflects a sustained pattern of performance. COHS faculty and academic administrators believe the best way to evaluate scholarly activity is through a narrative addressing a candidate’s accomplishments and progress related to scholarship (both traditional and creative), and/or engaged practice activity. Within the narrative, candidates should describe their activity in relation to the discipline; progress in initiating and completing projects; methodological approaches to scholarship; consulting efforts; professional development at workshops or seminars; works in progress; and self-evaluation of scholarship and/or engaged practice. Sources contributing to a narrative include but may not be limited to: (1) traditional forms of scholarship, such as peer-reviewed scholarly publications (including articles, books and chapters, and monographs), published conference proceedings, and presentations at international, national, state, and regional conferences; (2) creative scholarship, such as visual essays, demonstrations/displays, design portfolios, commissioned works, and exhibitions; and (3) dissemination or additional examples of scholarly activity examples, including invited publications, published white papers, external and internal grants, patents, trademarks, contracts, advanced training, and other indicators addressed in this section. It should be noted that the examples provided above are not exhaustive and non-tenure track faculty members are encouraged to visit with their Chair / Director and/or the COHS Dean should there be a question about a faculty member’s cited example(s) of scholarship.

In summary, the body of work is expected to show that the overall composite of the candidate’s scholarly or practice activity is substantial, balanced, and shows future promise for continuation.

Service

Professional service is essential to the success of each department/school and the COHS as a whole. As in the case of teaching, and scholarly activity, the faculty member should include a narrative that explains the kinds of service in which they have been involved and the significance of their involvement. While service takes many forms and varies by department/school, the candidate must have demonstrated sustained involvement in service to the department, college, university, profession, and/or community. Evidence of involvement may include, but not be limited to: organization of professional conferences, seminars, workshops, or short courses (continuing professional education); leadership in appropriate professional organizations; a record of service to the department, college, university, profession, and/or community; and significant contribution to self-studies/accreditation reports. Service in healthcare agencies in which faculty make valuable contributions in clinical settings through committee leadership/membership and governance work is also valued. Higher weighting should be
assigned to service as the leader or significant contributor to program accreditation self-study and related reports.

**For Promotion from Associate Research Professor to Research Professor**

Per APS 890301, Section 5.02(d), "the candidate must have served at least five (5) years at the associate research professor rank. During these years, the candidate must have demonstrated sustained excellence and leadership based on department and college criteria for scholarly/creative activities, and where applicable, student advising and service in accordance with the faculty member’s annual departmental offer letters. Excellence in research student advising or service, where applicable," Guidelines for consideration for promotion to Clinical Professor include:

**Scholarly Activity** The importance of scholarly activity in academia is two-fold: discovery and practice. Non-tenure track faculty should consult with their chair/director for guidance on the types of activities that fulfill their contractual requirements, and therefore serve as the basis upon which a candidate is evaluated for promotion.

The evaluation of scholarly activity, like that of teaching, should be holistic, drawing from a variety of sources of evidence that reflects a sustained pattern of performance. COHS faculty and academic administrators believe that the best way to evaluate scholarly activity is through the creation of a narrative that addresses a candidate’s accomplishments and progress related to scholarship and/or engaged practice activity. Within the narrative, candidates should describe their activity in relation to the discipline; progress in initiating and completing projects; methodological approaches to scholarship; consulting efforts; professional development at workshops or seminars; works in progress; and self-evaluation of scholarship and/or engaged practice. Other examples of engaged practice include actual clinical or field-based practice, involvement in quality improvement projects, development of best practice guidelines, and more generally, leading in practice change. Sources contributing to a narrative include but may not be limited to: (1) traditional forms of scholarship, such as peer-reviewed scholarly publications (including articles, books and chapters, and monographs), published conference proceedings, and presentations at international, national, state, and regional conferences; (2) creative scholarship, such as visual essays, demonstrations/displays, design portfolios, commissioned works, and exhibitions; and (3) examples, including invited publications, published white papers, external and internal grants, consulting contracts, clinical or field practice and/or evidence of leadership in practice change; certificates of completion, licensures and other professional credentials within the field, advanced training, and other indicators addressed in this section. It should be noted that the examples provided above are not exhaustive and non-tenure track faculty members are encouraged to visit with their Chair / Director and/or the COHS Dean should there be a question about a faculty member’s cited example(s) of scholarship.

In summary, the body of work is expected to show that the overall composite of the candidate’s scholarly or practice activity is substantial, balanced, and shows future promise for continuation.

**Service**

Professional service is essential to the success of each department/school and the COHS as a whole. As in the case of teaching and scholarly activity, the faculty member should include a narrative that explains the kinds of service in which they have been involved, and the significance of their involvement. While service takes many forms and varies by department/school, the candidate must have
demonstrated sustained involvement in service to the department, college, university, profession, and/or community. Evidence of involvement may include, but not be limited, to: organization of professional conferences, seminars, workshops, or short courses (continuing professional education); leadership in appropriate professional organizations; a record of service to the department, college, university, profession, and/or community; and significant contribution to self-studies/accreditation reports. Service in healthcare agencies in which faculty make valuable contributions in clinical settings through committee leadership/membership and governance work is also valued. Higher weighting should be assigned to service as the leader or significant contributor to program accreditation self-study and related reports.