

Faculty Professor Application Form

People and Culture

Details of Current Appointment

Prefix: _____ First Name: _____ Last Name: _____
Employee ID: _____ Faculty: _____ Department: _____
Period of Appointment: _____ to _____
(one to five years in duration)

Recommendation of the Dean

A letter of recommendation from the Dean must be attached and include details about how this appointment aligns with the Faculty Professor Policy (i.e. how it will fit in with the Faculty's three-year plan) and any supporting information, such as research grant data. Visit the [Hiring Faculty Professors](#) webpage for more information on the process and policies.

Assessment/Recommendation of the Vice-President (Research)

Approved

Not Approved

Name: _____ Signature: _____ Date: _____

Action of the Provost & Vice President (Academic)

☐ Approved

☐ Not Approved

Name: _____ Signature: _____ Date: _____

Please return the signed form to academic.contracts@ucalgary.ca.

Last Updated: May 2026