# Term Reappointment Request Letter

# TEMPLATE

# (please copy and paste text below into your personal letterhead)

[DATE]

George Q. Daley, MD, PhD

Dean of the Faculty of Medicine
c/o Office for Faculty Affairs

Harvard Medical School

Gordon Hall, Suite 206

25 Shattuck Street

Boston, Massachusetts 02115

Dear Dean Daley:

I am writing to request the reappointment of [FULL NAME OF FACULTY MEMBER] as [RANK] in the Department of [DEPARTMENT NAME] for the period October 31, [CURRENT YEAR] through October 30, [APPOINTMENT END YEAR].

Teaching Hours for the period 7/1/[YEAR]- 6/30/[YEAR] were:

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Hours Teaching Students in Courses | Hours Formal Teaching Residents, Fellows, Post-Docs | Hours Clinical Supervision and Training | Hours Laboratory and Other Research Supervision and Training | Hours Formal Teaching of Peers (eg., CME) | Hours of Local Invited Presentation(s) | HoursMentoringTrainees and Peers | HoursEdu Admin and Service |
|  |   |   |   |   |   |   |   |

His/her faculty mentor is [FACULTY MENTOR NAME] and the date of their last annual conference [DATE OF LAST ANNUAL CONFERENCE].

Activities which warrant his/her reappointment include [ACTIVITIES SUPPORTING CONTINUTED APPOINTMENT].

[UPDATE ON ACADEMIC TRAJECTORY AND PROGRESS OR PLANS TOWARDS PROMOTION. Check option that applies below. Please feel free to include additional descriptive text to this section.]

* Unable to assess at this time; faculty member in first term at rank.
* Promotion anticipated over the course of the new term.
* No promotion anticipated in the upcoming term because [STATE REASON].

This position is funded by [FUNDING SOURCE(S)].

[STATEMENT ON INTEGRITY AND PROFESSIONALISM (required for this letter)]

This candidate is a faculty member in good standing with an appropriate hospital appointment and associated credentialing. To the best of my knowledge, other than as may be indicated herein, the candidate has not been sanctioned or disciplined by a hospital, state licensing board, the NIH, the FDA, or any other legal, regulatory, or institutional authority. There are no pending or closed investigations or other concerns known to me that raise questions about the candidate’s integrity, professionalism, competence, interactions with colleagues, or the quality of the candidate’s contributions as a member of the Faculty of Medicine of Harvard University.

S/he is a productive member of the Department and I anticipate that s/he will continue with his/her current activities over the next [insert three or five] years.

Sincerely,

[DEPARTMENT HEAD SIGNATURE]

Encl.: [FACULTY MEMBER’S NAME] updated Harvard C.V.