

National Chung Hsing University _____ Academic Year ____ Semester Promotion (Reappointment) Teacher's Work Submission Review Form			
Department: _____	Position:	Name:	Date of appointment to the current position :
Current Teaching Subjects:			
Academic Expertise:			
Submitted Work for Review	Title: (If in a foreign language, please add the Chinese translation in parentheses)		
	Publication Location:		
	Publication Date:	Number of Copies Sent:	
Reference Work List:			
Review Status by Department Faculty Review Committee:			
Signature of Department Head:		Submitted on:	
<p>Form Instructions:</p> <ol style="list-style-type: none"> Teachers applying for promotion should fill out this form and submit it along with their works for review by the Department Faculty Review Committee. The department will consolidate and submit it to the college. If this form is insufficient, please make copies and fill them out. 			