SDSU Academic Affairs

2024-25 Clinical Scholar Request Form

follege:	Dept/School:	Emphasis/Area:
unded:College orAA	Rank Requested:	College Priority (e.g., 1/8):
Description of Shared Govern lease provide a brief description this proposal (300 words max,	of ways in which principles of	shared governance were reflected in the process lead
rollment trends in a program, st	udent:faculty ratios, relevance t	s that support this proposal, if applicable, e.g., o the recruitment of a diverse student body, etc. Pleadies and Institutional Research (ASIR) (300 words a

III. Program-Related Factors Please provide a brief description of the program-related factors that support this proposal, if applicable, e.g., existing gaps in expertise, Academic Program Review findings, accreditation/certification or other external review findings, uniqueness of the program, opportunities to build on distinctive strengths, program contributions to SDSU strategic initiatives, including growth of Imperial Valley or Mission Valley campuses, opportunities for future program expansion etc. (300 words max, no appendixes, no attachments).
IV. Research-Related Factors Please provide a brief description of the factors related to the goal of enhancing and expanding research capacity across campus, including if related to the goal of achieving the R1 status, that support this proposal, if applicable, e.g., maintain the strength of existing doctoral programs, establish new doctoral programs, strengthening research infrastructure in one or more colleges, etc. (300 words max, no appendixes, no attachments).

	licable, e.g., field- ixes, no attachme			gion, state, or neartnerships, re		rosites, etc. (300	
Planning-R	elated Factors						
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	n will support the degree learning objectives (DLO) for the applicable) programs (300 word max, no appendixes, no
recruiting and promoting the academic success of a d	icant factors that support this proposal, e.g., investments related to liverse student body, needs associated with personnel changes, of a faculty member to an administrative position (300 words
Identify Research Space (Lab/Room #)	Office (Room #)
Renovation Cost Estimate if applicable	
Another form (Part II) will be provided later for S	Startup Costs after the Tenure-Track faculty lines are approved.
Please email this form to your dean first.	, and and approved