**SAMPLE RTP LETTER OF RECOMMENDATION**

[DATE]**1**

Professor [FIRST NAME] [LAST NAME]

[DEPARTMENT/SCHOOL]

[COLLEGE]

Dear Professor [LAST NAME]:

After reviewing your material submitted for performance review, I/we recommend [insert recommendation here, using following language]:

|  |  |  |
| --- | --- | --- |
|  | **Favorable Recommendation** | **Unfavorable Recommendation** |
| **3rd year** | Recommend reappointment to a successor 3-year probationary contract effective academic year 2024-2025. | Recommend terminal year effective academic year 2024-2025. |
| **6th year**  | Recommend promotion to Associate Professor with tenure effective academic year 2024-2025. | Recommend terminal year effective academic year 2024-2025. |
| **Associate Professor Seeking Tenure**  | Recommend the awarding of tenure effective academic year 2024-2025. | Not Recommended**3**  |
| **Associate Professor Seeking Tenure and Promotion** | Recommend promotion to Professor with tenure effective academic year 2024-2025. | Not Recommended**3** |
| **Associate Professor Seeking Promotion** | Recommend promotion to Professor effective academic year 2024-2025. | Not Recommended**3** |

*[CONTENT: Discuss the candidate's strengths and weaknesses in teaching effectiveness, professional growth, and service. For professional growth, the department committee or department chair/school director* ***must*** *contextualize the candidate’s achievements within their discipline--eg. standing of journals or venues where work has been published or presented. These comments provide a context for evaluation by reviewers at the college and university level who may not be familiar with the discipline. Carefully choose wording to indicate improvements needed without using words such as “in two years” or “by next fall.”]*

In accordance with the University Policy File, you are hereby notified that [insert name of *Associate Dean* if applicable] was given access to your evaluation materials to assist me during the performance review process.

You have the right to submit a response or rebuttal statement in writing to this letter of recommendation. If you choose to submit a written response, it must be submitted by November XX, 20XX.**2**

Sincerely,

[Add Signature of Reviewer]

[Name]

[Title]

**OR**

Sincerely,

[Add Signature of Committee Chair]

[Department/School Peer Review Committee] or [College Peer Review Committee]

[Name, Chair] [Name] [Name]

[Name] [Name] [Name]

[Name] [Name] [Name]

cc:

* Copy previous or parallel levels of review. Department / school committees should copy department chairs/school directors; college committees should copy deans
* Copy Associate Vice President for Faculty Advancement and Student Success
* Copy the College RTP Representative in your Dean’s Office

**1**Letters must be dated no later than deadlines indicated on timeline. Chair/director’s letter can be dated same day as department committee letter, but not earlier. Dean’s letter can be dated same day as college committee letter, but not earlier.

**2** To calculate the due date, use 10 calendar days from the date of the letter(which should also be the same day the candidate receives the letter of recommendation). If the 10th day falls on a Saturday, Sunday, or holiday when campus is officially closed, use the next working day. Do not count the date of the letter as one of the 10 days. If a holiday or campus closure falls within the 10 day period, it is still counted.

**3**Not Recommended: “I/We regret to inform you that I/we cannot recommend \_\_\_\_\_\_\_\_\_\_\_ (e.g., promotion to the rank of professor) at this time.”