

APPLICANT REVIEW FORM

CONFIDENTIAL

POSITION: ASSISTANT PROFESSOR OF SPECIAL EXDUCATION: Multicategorical Mild Disabilities / Assessment & Academic Interventions

Reviewer's Signature: _____

Date: _____

Name	Earned Doctorate Date/degree	2 years teaching experience	UG or GR teaching, Advising	Course/program development: sped & gen ed	Online instruction, Distance ed	Collaboration, work across disciplines	Research agenda, publications	External Grant Potential	Service activities	Comments	Overall Rating 2-1-0

- 2 = Exceeds Minimum Requirements**
- 1 = Meets Minimum Requirements**
- 0 = Does Not Meet Minimum Requirements**