Associate Member Appointment Application Form

SPPH Associate Membership may be granted to a UBC-Vancouver full-time faculty member at the Assistant Professor, Associate Professor or Professor ranks, tenured or tenure-track. Associate Membership honours *substantive ongoing contributions* *to teaching, service, and/or research* in the School of Population and Public Health.

All matters relating to promotion, tenure, and salary remain the responsibility of the UBC department/school in which the faculty member holds her/his primary appointment.

Prior to completing this form, please read the **Associate Member Appointment Policy and Procedures** for guidance.

**Applicant Information**

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| **Applicant Name:** | **Date:** |
| **UBC Rank:**  Professor  Associate Professor  Assistant Professor | **CAMPUS Address:**  **Email:**  **Phone:** |
| **UBC Home Department / School:** | **UBC Home Department Head / Director:** |
| **Does your home department offer a graduate degree program?**  Yes  No  **Are you a faculty member in any other graduate degree program** (outside your home department)**?**  Yes If yes, name of program:  No | |
| **Check documents attached with this application** **form** (all required)**:**  Your UBC Curriculum Vitae  Letter of nomination from full-time SPPH faculty member sponsor  Joint letter from SPPH Division Head & Associate Committee Member confirming meeting to discuss your role and the results of that meeting | |

**SPPH Division & Sponsor Information**

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| **SPPH Faculty Sponsor Name:** | **SPPH Division:** |

**Applicant’s Proposed Role in SPPH**

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| **Your proposed role in Division and SPPH as discussed in meeting between** you and the SPPH Division Head:  Teaching or co-teaching one or more courses in the SPPH curriculum. If yes, please provide SPPH course name(s) and number(s), and describe your role:  Serving as a member of one or more SPPH standing committees. If yes, please provide SPPH committee name(s) and describe your role:  Leading or co-leading a program of research affiliated with SPPH and involving SPPH faculty. If yes, please provide research program name(s) and name SPPH faculty involved:  Serving on thesis committees of SPPH MSc and/or PhD students. If yes, please provide name(s) of student(s):  Providing a formal on-going advisory role to SPPH graduate students. If yes, please provide details of this role:  Other roles. Please provide details: |

**This page is for administrative use:**

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| **Membership recommended by Associate Member Committee:**  Yes  No | **If yes,**  **Date of approval by SPPH Director:**  **Date of approval by Head of applicant’s home department:**  **Date of approval by SPPH full faculty meeting:**  **Term start date:**  **Term end date:** (4-year SPPH Activity Report due) |

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| **Reappointment recommended by Associate Member Committee:**  Yes  No | **If yes, term start date:**  **Term end date:** (4-year SPPH Activity Report due) |
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