



CSU Bakersfield

Office of the Provost and
Vice President for Academic Affairs

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Faculty Request for Optional Fourth Year Review

Instructions: It is the responsibility of the faculty member to complete, obtain all required signatures, and submit this form to the Office of Provost and Vice President for Academic Affairs by **September 1**. If you have questions regarding this form, call Faculty Affairs at (661) 654-3403.

Faculty Name: _____

Department: _____

School: _____

*In accordance with Faculty Handbook section 305.4.1a, performance reviews are required of faculty for purposes of retention, the award of tenure, and promotion. All faculty will undergo performance reviews in years 1, 2, 3, 5, and 6 of their probationary period. At any level of the 3rd year review, a request for a full review during the 4th year may be made as part of that review. **The probationary faculty member may ask for a full review during the fourth year.***

☐ I request a full review during my fourth probationary year.

Faculty Member's signature

Date

Signatures Required:

Department Chair's signature

Date

School Dean's signature

Date