



TEXAS TECH UNIVERSITY HEALTH SCIENCES CENTER

School of Medicine

Operating Policy and Procedure

SOM OP: 20.21, **Faculty Tenure and Promotion**

PURPOSE: The purpose of this School of Medicine (SOM) policy and procedure is to provide guidelines for School of Medicine faculty to receive tenure and/or promotion as outlined in HSC OP 60.01.

REVIEW: This SOM Policy and Procedure shall be reviewed within each even-numbered fiscal year by the Tenure and Promotions Committee and the Faculty Council. Revisions will be forwarded to the Office of the Dean for approval and publication.

POLICY/PROCEDURE:

The tenure and promotion cycle is an annual process that begins in the spring. The tenure and promotion procedures are outlined in [SOM OP 20.21.A, SOM Procedures for Tenure and Promotion](#), and relevant dates can be found in [SOM OP 20.21.B, SOM Tenure and Promotion Timeline](#). The faculty member's Application for Tenure and Promotion may be completed by generating the [Digital Measures SOM Application for Tenure and/or Promotion Report](#). [SOM OP 20.21.C.Instructions, T&P Application Instructions](#), is available for completing the application.

Generally, the procedure for promotion will be initiated by the Campus Department Chair after a careful evaluation of the faculty member. However, if a faculty member has held a given rank for a number of years and has not been recommended for promotion, and the faculty member feels that he/she is qualified for promotion, the promotion evaluation process will be initiated at the faculty member's request through that faculty member's Campus Department Chair.

In accordance with decisions issued by the State of Texas Office of the Attorney General regarding privacy of documents, TTUHSC acknowledges and maintains that all materials collected or generated as part of the Tenure and Promotion (T&P) packet constitute reports of a medical committee and/or medical peer review documents. As such, this confidential information is available solely to persons who are involved in the deliberative T&P process or those who review documentation at the behest of the T&P Committee. Once the faculty candidate submits the dossier, s/he shall not have access to the promotion packet. The prohibition against disclosing reports of a medical committee and/or medical peer review information includes, but is not limited to, the dossier, ballots, letters of reference ([SOM OP 20.21.E, Tenure Track Reference Template](#); [SOM OP 20.21.F, Non-tenure Track Reference Template](#); [SOM OP 20.21.I, Tenure only Reference Template](#); [SOM OP 20.21.G, Clinical Excellence Reference Template](#)), communications regarding the T&P process, recommendations by the Department T&P Committee and Chair, the School T&P Committee, the Dean, the President, and Regents, respectively.

POLICY/GUIDELINES:

1. **Guidelines for Tenure and Promotion.** The following Guidelines are based upon [HSC OP 60.01, Tenure and Promotion Policy](#). The criteria and areas of performance to be considered in the tenure and promotion decision processes are:
 - a. Teaching
 - b. Scholarship
 - c. Clinical Service
 - d. Academically-Related Public Service

2. **Scholarship.** Scholarship is expected in all areas that are applicable to the individual faculty member and may be demonstrated in education, research, and clinical service.
3. **Tenure.** Tenure has been developed so that the School of Medicine (SOM) may have the benefit of the competent and honest judgment of its faculty. It is awarded to faculty with a proven record of academic accomplishment as referred to above, who hold the potential for long-term value to the SOM. Promotion is awarded to faculty based upon specific guidelines for academic accomplishment as referred to below.
 - a. Tenure Track Probationary Period. Each faculty member on the tenure track must be considered for tenure no later than during **the last** probationary year of that faculty member's appointment. For the purposes of tenure and computation of probationary years accrued, each faculty member's appointment is considered to have begun on the 1st day of September of the **calendar** year during which the initial appointment was made. **The Probationary periods for Assistant Professor, Associate Professor and Professor are 7 years.** The Campus Department Chair will be notified of the faculty in their department being considered for **mandatory** tenure. Names of faculty wishing to be considered for **early** tenure should be submitted in writing by the Campus Department Chair to the Office of Faculty Affairs and Development.
 - b. Non-tenure/Tenure Track transitions. The transition from the non-tenure track series to the tenure track series, or vice versa, using the [SOM OP 20.21.D, Tenure Option Form](#), may be permitted following review and by mutual agreement of the faculty member, the respective department chair and the dean. Absent extraordinary circumstances which are approved by the dean, only one transfer between tracks will be permitted.
4. **Clinical Faculty.** Clinical faculty on the *tenure track* will be expected to demonstrate excellence in at least one area, i.e., teaching, scholarship, or clinical service (area determined by the faculty member and the respective chairperson), with meaningful participation in two other areas, i.e., teaching, scholarship, clinical service, and academically-related public service. Clinical faculty on the *non-tenure track* will be expected to demonstrate excellence in at least one area, i.e., teaching, scholarship or clinical service (area determined by the faculty member and the respective chairperson), with meaningful participation in at least one of the other areas, i.e., teaching, scholarship, clinical service, or academically-related public service. An Assistant Professor who demonstrates excellence in clinical service and/or teaching will not be penalized for lack of scholarship. However, documented scholarship, as defined by Boyer's criteria, will enhance chances of promotion for any individual.

As indicated above, the emphasis placed on each of these four areas will depend on the candidate's primary responsibilities as determined with the respective chairman. For example, those whose duties are primarily patient care and teaching, i.e. clinical educators, will be evaluated primarily on their patient care and teaching activities.

5. **Basic Science Faculty.** Basic Science faculty on the *tenure track*, will be expected to demonstrate excellence in at least one area, i.e., teaching or scholarship (area determined by the faculty member and the respective chairperson), with meaningful participation in two areas, i.e., teaching, scholarship, and academically-related public service. Basic Science faculty on the *non-tenure track* will be expected to demonstrate excellence in at least one area, i.e., teaching or scholarship (area determined by the faculty member and the respective chairperson), with meaningful participation in at least one of the other areas, i.e., teaching, scholarship, or academically related public service.
6. **All Faculty.**
 - a. For all faculty, meaningful participation in scholarship will be required for promotion to Full Professor whether in the tenure or non-tenure track.
 - b. Full-time 9- or 12-month appointments refer to paragraph 6.e. in [HSC OP 60.01, Tenure and Promotion Policy](#), for eligibility for tenure.

- c. Promotions for part-time faculty (1-49% FTE) are requested by the department chair through submission of a letter of justification to the dean of the SOM.

7. Excellence Criteria. Criteria by which excellence can be established in each area of performance are listed in Tables 1-3. These lists are not intended to be all-inclusive, but rather represent examples. Furthermore, it should be noted that these tables are “guidelines” and the T&P Committee and the Dean will take exceptional circumstances into consideration when considering the promotion (and/or tenure, if applicable) of exceptional faculty. Criteria tables include:

- a. Table 1: Faculty who are in a clinical department whether on the tenure or non-tenure track (e.g. Assistant Professor of Medicine)
- b. Table 2: Faculty who are in a basic science department whether on the tenure or non-tenure track (e.g. Assistant Professor of Microbiology)
- c. Table 3: Faculty who are on a non-tenure track and are engaged primarily in research, with incidental teaching and/or patient care responsibilities (Research Appointments; e.g. Research Assistant Professor of Medicine or Research Assistant Professor of Microbiology)

Table 1. Clinical Faculty

	Instructor	Assistant Professor	Associate Professor	Professor
1. Education and training	<ul style="list-style-type: none"> ▪ Ph.D. with appropriate training and licensure/certification in area of clinical specialty, if applicable. ▪ MD or DO from an LCME or AOA accredited institution. ▪ ECFMG certification for international medical graduates. ▪ Completion of ACGME approved residency training in specialty. 	<ul style="list-style-type: none"> ▪ Same requirements as for Instructor plus ▪ Completion of ACGME-approved sub-specialty training (if applicable). ▪ Ability to attain board certification from the appropriate American Board of Medical Specialties ▪ Maintenance of Certification as applicable. 	<ul style="list-style-type: none"> ▪ Same requirements as for Assistant Professor plus ▪ Board certification from the appropriate American Board of Medical Specialties. ▪ American Board certification in sub-specialty if applicable. ▪ Maintenance of Certification as applicable. 	<ul style="list-style-type: none"> ▪ Same requirements as for Associate Professor. ▪ Maintenance of Certification as applicable.
2. Teaching	<ul style="list-style-type: none"> ▪ Willingness to participate in and develop capability in teaching 	<ul style="list-style-type: none"> ▪ Previous experience or potential for competence in educating medical students, residents, or graduate students... 	<ul style="list-style-type: none"> ▪ Expertise in educating medical students, residents or graduate students, as evidenced by some of the following: <ul style="list-style-type: none"> • development of educational materials; • favorable student and peer evaluations; funding; • invited research presentations, CME programs or Grand Rounds presented at this and other institutions; • documentation of enhancement of teaching skills; • service on thesis or dissertation committees. 	<ul style="list-style-type: none"> ▪ A distinguished record of educating medical students, residents or graduate students, as evidenced by some of the following: <ul style="list-style-type: none"> • teaching awards; • development of new educational methods, courses, clerkships, or residency programs; • participation in regional and/or national educational activities; • course directorships; • service on thesis or dissertation committees.
3. Scholarship	<ul style="list-style-type: none"> ▪ Optional not required 	<ul style="list-style-type: none"> ▪ Capacity for mentored or independent research. 	<ul style="list-style-type: none"> ▪ Evidence of a significant combination of peer-reviewed contributions (e.g., papers, case reports, book chapters, abstracts, funding) based upon research, development of new education modules, development of new clinical programs, procedures, services, therapies, or health care delivery systems. ▪ Scholarship contributions for consideration of tenure will reflect work done at TTUHSC but for promotion will include the candidate's career accomplishments. 	<ul style="list-style-type: none"> ▪ Evidence of regional and/or national recognition, for a significant combination of peer-reviewed contributions (e.g., papers, case reports, book chapters, abstracts, funding) based upon research, development of new education modules, development of new clinical programs, procedures, services, therapies or health care delivery systems. ▪ Scholarship contributions for consideration of tenure will reflect work done at TTUHSC but for promotion will include the candidate's career accomplishments.
4. Clinical Service	<ul style="list-style-type: none"> ▪ Competence in patient care 	<ul style="list-style-type: none"> ▪ Competence in patient care. 	<ul style="list-style-type: none"> ▪ Expertise in area of specialty, as evidenced by an appropriate level of clinical activity, letters from patients and experts in the field, and by evaluations from peers, residents, and/or students. 	<ul style="list-style-type: none"> ▪ A distinguished record in area of specialty, as evidenced by regional and/or national recognition, a continuing appropriate level of clinical activity, medical directorships or other positions of clinical leadership
5. Academically Related Public Service	<ul style="list-style-type: none"> ▪ None 	<ul style="list-style-type: none"> ▪ None 	<ul style="list-style-type: none"> ▪ Service on TTUHSC, School of Medicine, hospital and/or departmental committees. Participation in Professional, Academic, or Health-related organizations, committees or programs. 	<ul style="list-style-type: none"> ▪ Continued service and leadership on TTUHSC, School of Medicine, hospital and/or departmental committees. Leadership in Professional, Academic, or Health-related organizations, committees or programs.

Table 2. Basic Science Faculty

	Assistant Professor	Associate Professor	Professor
1. Education and training	<ul style="list-style-type: none"> ▪ PhD, MD, DVM or an equivalent degree from an accredited institution. 	<ul style="list-style-type: none"> ▪ Same requirements as for Assistant Professor. 	<ul style="list-style-type: none"> ▪ Same requirements as for Assistant Professor.
2. Teaching	<ul style="list-style-type: none"> ▪ Previous experience or potential for competence in educating medical students, residents, or graduate students. 	<ul style="list-style-type: none"> ▪ Expertise in educating medical students, residents or graduate students, as evidenced by some of the following: <ul style="list-style-type: none"> • development of educational materials; • favorable student and peer evaluations; funding; • invited research presentations, CME programs or Grand Rounds presented at this and other institutions; • documentation of enhancement of teaching skills; • service on thesis or dissertation committees. 	<ul style="list-style-type: none"> ▪ A distinguished record of educating medical students, residents or graduate students, as evidenced by some of the following: <ul style="list-style-type: none"> • teaching awards; • development of new educational methods, courses, clerkships, or residency programs; • participation in regional and/or national educational activities; • course directorships; • service on thesis or dissertation committees.
3. Scholarship	<ul style="list-style-type: none"> ▪ Capacity for scholarly activity. Previous experience as evidenced by peer-reviewed publications. 	<ul style="list-style-type: none"> ▪ Documentation of scholarly productivity, achieved either independently or collaboratively, usually evidenced by the following: <ul style="list-style-type: none"> • A significant combination of peer-reviewed contributions (e.g., papers, case reports, book chapters, abstracts) based upon basic or clinical research, educational, or professional scholarship; • External funding of either national or regional peer-reviewed grants; • An expectation of continued funding. ▪ Scholarship contributions for consideration of tenure will reflect work done at TTUHSC but for promotion will include the candidate's career accomplishments. 	<ul style="list-style-type: none"> ▪ A national reputation, usually evidenced by the following: <ul style="list-style-type: none"> • Service on journal editorial boards or regional and/or national grant study sections; • A sustained record of peer-reviewed publications in high quality journals; • Continued external funding of either national or regional peer-reviewed grants ; • An expectation of continued funding. ▪ Scholarship contributions for consideration of tenure will reflect work done at TTUHSC but for promotion will include the candidate's career accomplishments.
4. Patient care	<ul style="list-style-type: none"> ▪ Little or none 	<ul style="list-style-type: none"> ▪ Little or none 	<ul style="list-style-type: none"> ▪ Little or none
5. Academically Related Public Service	<ul style="list-style-type: none"> ▪ None 	<ul style="list-style-type: none"> ▪ Service on TTUHSC, School of Medicine, hospital and/or departmental committees. Participation in Professional, Academic, or Health-related organizations, committees or programs. 	<ul style="list-style-type: none"> ▪ Continued service and leadership on TTUHSC, School of Medicine, hospital and/or departmental committees. Leadership in Professional, Academic, or Health-related organizations, committees or programs.

Table 3. Basic Science Faculty on a Non-Tenure Track and Primarily Engaged in Research

	Assistant Professor	Associate Professor	Professor
1. Education and training	<ul style="list-style-type: none"> ▪ PhD, MD, DVM or an equivalent degree from an accredited institution. 	<ul style="list-style-type: none"> ▪ Same requirements as for Assistant Professor. 	<ul style="list-style-type: none"> ▪ Same requirements as for Assistant Professor.
2. Teaching	<ul style="list-style-type: none"> ▪ Little or none 	<ul style="list-style-type: none"> ▪ Little or none 	<ul style="list-style-type: none"> ▪ Little or none
3. Scholarship	<ul style="list-style-type: none"> ▪ Capacity for scholarly activity. Previous experience as evidenced by peer-reviewed publications. 	<ul style="list-style-type: none"> ▪ Documentation of scholarly productivity, achieved either independently or collaboratively, usually evidenced by the following: <ul style="list-style-type: none"> • Evidence of a significant combination of peer-reviewed contributions (e.g., papers, case reports, book chapters, abstracts) based upon research. • External funding of either national, or, regional, peer-reviewed grants; • An expectation of continued funding. 	<ul style="list-style-type: none"> ▪ A national reputation, usually evidenced by the following: <ul style="list-style-type: none"> • Service on journal editorial boards or regional and/or national grant study sections; • A sustained record of peer-reviewed publications in high quality journals; • Continued external funding of either national, or, regional, peer-reviewed grants. • An expectation of continued funding.
4. Clinical Service	<ul style="list-style-type: none"> ▪ Little or none 	<ul style="list-style-type: none"> ▪ Little or none 	<ul style="list-style-type: none"> ▪ Little or none
5. Academically Related Public Service	<ul style="list-style-type: none"> ▪ None 	<ul style="list-style-type: none"> ▪ Service on TTUHSC, School of Medicine, hospital and/or departmental committees. Participation in Professional, Academic, or Health-related organizations, committees or programs. 	<ul style="list-style-type: none"> ▪ Continued service and leadership on TTUHSC, School of Medicine, hospital and/or departmental committees. Leadership in Professional, Academic, or Health-related organizations, committees or programs.

8. **Examples of Meaningful and Excellent Participation.** Tables 4-7 contain examples of meaningful and excellent participation in the four (4) areas of performance (Teaching, Scholarship, Clinical Service, Academically Related Public Service). **Note: These are examples only and not requirements.*

Table 4. Teaching

Meaningful Participation	Excellent Participation
<ul style="list-style-type: none"> ▪ Active participation in teaching activities of the department such as presenting a series of lectures, coordinating a course, advising students, residents ▪ Delivery of educational material to students, residents, trainees, research fellows, or peers in health professions training programs ▪ Instructs in laboratory sessions for health science students ▪ Facilitates small group sessions for health science students ▪ Presents teaching rounds or patient conferences ▪ Supervises trainees performing outpatient or inpatient clinical service ▪ Participates in teaching or supervision of medical and/or graduate students ▪ Participates in postgraduate or continuing education course which serves a local audience ▪ Receives satisfactory evaluations from learners ▪ Demonstrates commitment to enhancing educational skills by participating in courses, conferences, workshops, on-line learning experiences, etc. related to one's educational responsibilities ▪ Prepares curriculum materials (syllabus materials, Worked Case Examples, etc.) ▪ Supervises or coordinates the teaching by other faculty, fellows, residents, or graduate students (e.g., Course or Unit Director) ▪ Develops/directs a postgraduate or continuing education course which serves a regional audience ▪ Invited to present lectures at the state or regional level ▪ Invited lecturer at other institutions of higher education (e.g., universities, health professions schools) or research and development facilities or institutes ▪ Develops and participates in the teaching of major portions of a graduate course ▪ Supervises graduate students (M.S. or Ph.D.), MPH thesis for students in MD-MPH program, serves as project mentor for MD student Scholarly Activity and Research Project requirement ▪ Demonstrates meritorious teaching ability as measured by learner evaluation and peer review ▪ Receives a local teaching award 	<ul style="list-style-type: none"> ▪ Develops a course, curricular component, educational software, or evaluation material which are used regionally or nationally ▪ Invited to organize and participate in a symposium or plenary session at a regional or national educational meeting ▪ Develops innovative approaches to improving student/resident learning and enhancement of learning experiences ▪ Supervises a training program which has a regional or national audience ▪ Receives a regional or national teaching award ▪ Invited to be a visiting professor at another institution ▪ Provides educational leadership by writing textbook ▪ Favorable student and peer evaluations; funding ▪ Invited research presentations, CME programs or Grand Rounds presented at this and other institutions ▪ Documentation of enhancement of teaching skills ▪ Service on thesis or dissertation committees ▪ Teaching awards ▪ Development of new educational methods, educational materials, courses, clerkships, or residency programs ▪ Participation in regional and/or national educational activities ▪ Course directorships

Table 5. Scholarship*

Meaningful Participation	Excellent Participation
<ul style="list-style-type: none"> ▪ Publishes abstracts and presents results of research/scholarly activity at national and international meetings ▪ Actively involved in scholarly activity ▪ Submit disclosure of inventions; file patents ▪ Authorship (regardless of author rank) in peer-reviewed papers ▪ Participates in multi-center trials ▪ PI or Co-Investigator on peer-reviewed intramural grants ▪ Presentations at national meetings ▪ Invited scholarly talks intramural and extramural (Clinical/Teaching Scholarship) ▪ Co-author of review articles in peer-reviewed journals ▪ Development of teaching materials ▪ Publish articles on health professions education in educational journals, digital journals, or other peer-reviewed venues (e.g., MedEd Portal) ▪ Success in obtaining extramural, NIH-defined peer-reviewed grants or contracts; success in obtaining investigator initiated basic/applied research through grants or contracts with pharmaceutical, instrumental or other commercial enterprises ▪ Documented ongoing clinical, translational, and/or clinical outcomes research ▪ Recognition as an ad hoc journal reviewer or ad hoc member of review committees or study sections; consultant for private sector corporations ▪ Presentation of invited or peer-reviewed research results at national or international professional meetings ▪ Supervises graduate students (M.S. or Ph.D.), MPH thesis for students in MD/MPH program, serves as project mentor for MD student Scholarly Activity and Research Project requirement <p><i>*Boyer broadened the definition of scholarship to include: 1) scholarship of discovery, 2) scholarship of integration, 3) scholarship of application, and 4) scholarship of teaching. For additional information regarding these different forms of scholarship, please reference the paper published by the Boyer Carnegie Foundation for Advancement of Teaching 1990 and the paper published by Glassick on "Boyer's Expanded Definition of Scholarship, the Standards for Assessing Scholarship and the Elusiveness of the Scholarship of Teaching" published in Academic Medicine, September 2000.</i></p>	<ul style="list-style-type: none"> ▪ Inventions licensed, patents issued ▪ Consistent level of peer-reviewed publications that test hypothesis with first authorship and/or senior authorship ▪ PI or co-investigator on peer-reviewed grants, especially extramural ▪ PI or co-investigator on federally-sponsored studies ▪ Evidence of national recognition supported by external letters of reference, involvement at the national level in professional or research organizations, talks at national conferences ▪ Publication of review articles in peer-reviewed journals either as first or senior author ▪ Author of book chapters (or Up-to-Date type of media) ▪ Direction of scholarly activity of other faculty or post-doctoral appointees ▪ Continued success in obtaining extramural, NIH-defined peer-reviewed grant or contract funds or investigator initiated basic or applied research through grants or contracts with pharmaceutical, instrumental or other commercial enterprises ▪ Recognition as a journal editorial board member or editor ▪ Regular member of a special review committee or study section ▪ Invited to organize and participate in a major national or international scientific meeting ▪ Acquires FDA approvals; invention has a major impact on state-of-the-art; invention generates University resources ▪ Examiner for National Specialty Board ▪ Prepares and presents scholarly work at peer attended regional or national conferences or meetings ▪ Consults at the national level (e.g., Board of Scientific Advisors) ▪ Evidence of a significant combination of peer-reviewed contributions (e.g., papers, case reports, book chapters, abstracts, funding) based upon research, development of new education modules, development of new clinical programs, procedures, services, therapies, or health care delivery systems. ▪ Evidence of regional and/or national recognition, for a significant combination of peer-reviewed contributions (e.g., papers, case reports, book chapters, abstracts, funding) based upon research, development of new education modules, development of new clinical programs, procedures, services, therapies or health care delivery systems

Table 6. Clinical Service

Meaningful Participation	Excellent Participation
<ul style="list-style-type: none"> ▪ Demonstrates competence and promise of excellence in clinical, diagnostic, procedural or other professional work ▪ Considered a very good clinician or professional by students, residents, fellows and faculty ▪ Consults at local level ▪ Emerging consulting physician or professional at regional level ▪ Considered an excellent clinician or professional by local and regional peers ▪ Directs clinical or professional program ▪ Officer in local or regional clinical/professional society ▪ Publish documentation of intervention and outcome 	<ul style="list-style-type: none"> ▪ Known as an excellent clinician with special skills at a regional level ▪ Devises and implements a new method (diagnosis, therapy, critical pathway or standard guidelines, etc.) or procedure ▪ Develops and implements clinical or professional program ▪ Established consultant or attracts patients or clients on a regional, national, or international level ▪ Devises a new method or procedure which receives national or international recognition ▪ Contributes significantly to board examination (e.g., board examiner, test preparation) in specialty or subspecialty ▪ Officer in national or international clinical professional society ▪ Makes major clinical contributions appropriate to the mission of the School of Medicine ▪ Expertise in area of specialty, as evidenced by an appropriate level of clinical activity, letters from patients and experts in the field, and by evaluations from peers, residents, and/or students ▪ A distinguished record in area of specialty, as evidenced by regional and/or national recognition, a continuing appropriate level of clinical activity, medical directorships or other positions of clinical leadership

Table 7. Academically Related Public Service

Meaningful Participation
<ul style="list-style-type: none">▪ Demonstrates skills in managing activities or programs▪ Serves on committees▪ Conducts tests, procedures or data handling in support of a clinical or service laboratory▪ Serves as officer in state or local professional society▪ Serves as an Assistant or Associate Dean or other Administrative appointment, e.g., Chairperson, Vice or Associate Chairperson of a department▪ Serves as Program Director, Clerkship Director, or other position related to the mission of the TTUHSC SOM that involves significant time in administrative activities such as scheduling, evaluation, program development, documentation of unit activities, etc.▪ Consults nationally regarding service-related activities▪ Chairs medical subspecialty or professional society committee▪ Attracts substantial gifts or endowments to the School of Medicine▪ Service as a regular or ad hoc member on a national research or clinical review committee▪ Serves as officer or major committee member/chair in regional or national professional society▪ Chairs a departmental faculty search committee▪ Chairs a major committee (e.g., Admissions, Student Affairs, Grading and Promotion, etc.)▪ Serves as section chief, director or leader of a clinical area▪ Perform a service for the community or organizations within the community which are not directly associated with SOM▪ Service on TTUHSC, School of Medicine, hospital and/or departmental committees▪ Participation in Professional, Academic, or Health-related organizations, committees or programs

ATTACHMENTS:

[SOM OP 20.21.A – SOM Procedures for Tenure and Promotion](#)

[SOM OP 20.21.B – SOM Tenure and Promotion Timeline](#)

[SOM OP 20.21.C.Instructions – T&P Application Instructions](#)

[SOM OP 20.21.D – Tenure Option Form \(Word\)](#)

[SOM OP 20.21.I – Tenure Only Reference Template \(Word\)](#)

[SOM OP 20.21.E – Tenure Track Reference Template \(Word\)](#)

[SOM OP 20.21.F – Non-tenure Track Reference \(Word\)](#)

[SOM OP 20.21.G – Clinical Excellence Reference Template \(Word\)](#)

[SOM OP 20.21.H – SOM Procedures for Tenure and Promotion Committee](#)

[SOM OP 20.21.H.1 – Pre-Review Certification Form Regarding Conflict of Interest and Confidentiality](#)

[SOM OP 20.21.H.2 – Post-Review Certification Form Regarding Conflict of Interest and Confidentiality](#)