Form II

Affirmative Action Summary Report

Position Search Number:_____

Please complete this form and submit it to the appropriate Vice President/Dean with a list of all applicants, a copy of the curriculum vitae of the candidate of choice and a draft letter of offer. ***No offer may be extended until final approval has been received from the Office of the Associate Provost for Equal Opportunity and Affirmative Action.***

Department/School/Institute/Center: _____

Candidate's Name:_____ Gender:_____ Race/Ethnicity:* ____

Academic Title:_____ Tenured: ☐ Yes ☐ No

Field: _____

Start Date:_____ End Date:_____

Highest Degree Held:_____ Date Degree Obtained/Expected:_____

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1. Composition of Applicant Pool
   The Search Committee must consult with the Office of the Associate Provost for Equal Opportunity and Affirmative Action in order to complete the applicant pool statistics.

Total	Total Female	Total Minority

	Black	Hispanic	Asian/ Pacific Islander	Amer. Indian/ Alaskan Native	Non-Minority
Male					
Female					

2. Information on Finalist Pool
   List the names of all finalists who were interviewed or extensively reviewed for the position, including those considered to be among the finalist pool who subsequently withdrew. Indicate with an 'X' the finalists who are women, give the race/ethnicity of the minority candidates, and report the dates of all interviews. Attach extra sheets if necessary.

Name	Woman	Race / Ethnicity*	Date(s) Interviewed

* B = Black; H = Hispanic; A/PI = Asian or Pacific Islander; AI/AN = American Indian or Alaskan Native; W = White

3. Indicate which are the targeted groups for the department/school.

☐ Women ☐ Black ☐ Hispanic ☐ Asian/Pacific Islander ☐ American Indian/Alaskan Native

4. For each woman or minority candidate who is not being recommended for the position, indicate specifically the reasons for excluding him/her from final consideration for the appointment. *If the selectee is a member of the department's targeted group(s), the reasons for the nonselection of other applicants in the selectee's group need not be given.* Attach additional sheets if necessary.

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5. Were there any changes in the search plan previously submitted on the approved Search Plan Review Form?
☐ Yes ☐ No *If yes, attach additional sheets to describe the changes.*

6. Is this a request for a waiver of the standard search process? ☐ Yes ☐ No
If yes, please append a letter explaining the basis for the waiver.

Signatures

_____

Departmental/Division Chair Date

_____

Vice President/Dean Date

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For Affirmative Action Office Use Only

The recommended appointment is approved.

_____

Office of the Provost Date

Clearance Type: ☐ Regular ☐ Limited, cleared through _____
Date