

# New Faculty Packet Checklist Full-Time Faculty

New Hire Name: \_\_\_\_\_

Rank: \_\_\_\_\_

Position #: \_\_\_\_\_ Index #: \_\_\_\_\_

College: \_\_\_\_\_

Department: \_\_\_\_\_

Checklist Prepared By: \_\_\_\_\_

Hire Term: \_\_\_\_\_

Once conditional Offer is accepted: Collect hiring paperwork, submit all forms below to the [officeoftheprovost@lamar.edu](mailto:officeoftheprovost@lamar.edu).

| Items                                                                                                                                                                                                                   | Document                                                                                                                                                                                      | Initial Complete |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|
| 1.                                                                                                                                                                                                                      | <b>NEOED Requestion and Job Description:</b> This can be pulled from NEOED                                                                                                                    |                  |
| 2.                                                                                                                                                                                                                      | <b>Faculty Employment Application, Applicant's letter &amp; Vita:</b> This can be pulled from NEOED                                                                                           |                  |
| 3.                                                                                                                                                                                                                      | <b>College Offer Letter:</b> This is the college level offer of conditional letter.                                                                                                           |                  |
| 4.                                                                                                                                                                                                                      | <b><a href="#">F2.01 Employment Recommendation:</a></b> Required for initial employment regarding conditions with faculty contract.                                                           |                  |
| 5.                                                                                                                                                                                                                      | <b><a href="#">Documentation of Qualifications:</a></b> Form to be completed by Chair and approved by the Dean for each full-time faculty.                                                    |                  |
| 6.                                                                                                                                                                                                                      | <b>Official Transcripts</b> from ALL degree granting institutions. <a href="#">Guideline for Accepting Transcripts</a> (Official transcripts must be sent to the Provost Office)              |                  |
| 7.                                                                                                                                                                                                                      | <b><a href="#">English Proficiency Form:</a></b> Required for all new faculty.                                                                                                                |                  |
| 8.                                                                                                                                                                                                                      | <b>Three Recommendation Letters and Reference Checks:</b> Letters of recommendation and four <a href="#">Faculty Reference Forms</a> (Three reference checks & one off-list reference check). |                  |
| 9.                                                                                                                                                                                                                      | <b>Screening Matrix:</b> Listing of all applicants with scores                                                                                                                                |                  |
| 10.                                                                                                                                                                                                                     | <b>Interview Questions:</b> Committee questions and responses on all interviewees.                                                                                                            |                  |
| Provost Office will submit the approved hire packet to Human Resources for L# creation and onboarding. Upon the completion of the employment process, Human Resources will send notification of L# for EPAF submission. |                                                                                                                                                                                               |                  |

## Signature Required

Department Chair: \_\_\_\_\_

Date: \_\_\_\_\_

Business Manager: \_\_\_\_\_

Date: \_\_\_\_\_

Dean: \_\_\_\_\_

Date: \_\_\_\_\_

Provost for Academic Affairs: \_\_\_\_\_

Date: \_\_\_\_\_

## Provost Office Use Only

Date Received: \_\_\_\_\_ Date Processed: \_\_\_\_\_ Reviewed by: \_\_\_\_\_ L#: \_\_\_\_\_

Comments: \_\_\_\_\_