ATTACHMENT 1
THE UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER AT SAN ANTONIO
NOTIFICATION OF FACULTY VACANCY

Search Committee Chair/Interviewer: _______________________________________
Date: __________________________
Faculty Title: ______________________

Department/Division: ______________________

A vacancy exists, or will exist, for the position described below.

ACADEMIC RANK       TIME TYPE       PRE-EMPLOYMENT
___________________            ___________       IMMUNIZATION CRITERIA
                                      (check all applicable)
___ Clinical       ___ Professor       ___ Full-Time       ___ 1. Any patient or research subject contact
___ Research       ___ Associate Professor ___ Part-Time
___ Adjunct        ___ Assistant Professor ___ Temporary       ___ 2. Animal contact: and/or
___ Instructor     ___ Lecturer
___ Other Faculty

Ending Date is: ___________

Name of Person Replaced: ___________

Title: __________________________ OR ____________New Position

Advertisement Required: ____ Yes     ____ No      (If yes, attach a copies of the advertisements)

The recruitment sources to be used to establish the applicant pool are listed as follows: (Provide a list of names of the publication(s) and referral organizations and indicate what type of search: National, Regional, Local, Internal, or No Search)

Recruitment Source

A.________________________________________________

B.________________________________________________

C.________________________________________________

D.________________________________________________

E.________________________________________________

Type of Search

________________________________________________

________________________________________________

________________________________________________

________________________________________________

________________________________________________

Authorized Signature

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EO/AA OFFICE USE

Number: __________________________

Date: __________________________

Executive Director/Representative
Academic, Faculty and Student Ombudsperson and ADA Compliance Office
(Representative)

Send to: Executive Director, Academic, Faculty and Student Ombudsperson and ADA Compliance Office

Revised: 3/2014