DATE: Month, Day, Year

TO: Name of Department Chair

 Chair, Department of X

 Name of Dean

 Dean, College

FROM: Lecturer’s Name, Rank

 Department of X

SUBJECT: Lecturer Annual Review

<Lecturer should insert a summary of their activities for the current contract period and sign where indicated. Please keep the summary to 2 pages or less.>

*Lecturer Signs Here*

Lecturer’s Name (Printed) Date

Cc: John A. Pelesko, Provost and Senior Vice President for Academic Affairs

 Joseph Sramaty, Director of Academic Human Resources