



# William & Mary Arts & Sciences

OFFICE OF THE DEAN

## Courtesy Faculty Affiliate Scholar Appointment Request

(For non-W&M professional who holds credentials equivalent to W&M faculty)

### Section 1 – Appointee Information

Last Name: First Name: Middle Name:  
[Box] Mr. or [Box] Ms. **Non-W&M** E-mail Address:  
W&M Courtesy Title"(Select one):"  
HOME Address: Apt/Unit:  
City: State: Zip: Country:  
Preferred Phone: Date of Birth:

### Section 2 – Campus Information

Department Name:  
Department/Building/Off-Campus Location:  
Department Sponsor's Full Name:  
Department Sponsor's WMuserid:  
Department Sponsor's Phone Number:

### Section 3 – Type of Access Requested

Reason for granting affiliation with W&M. How will this appointee interact with your department?

For grant applications, specify prospective annual salary based on benchmark salaries. \$

Start date: End Date: (May not exceed a one-year period)

Is this a renewal? [Box] No [Box] Yes, note Banner ID#: 930

### Services that are granted automatically are:

Network Access, WM ID Card & Library Privileges (with W&M user account).

### Please check the box to indicate if the appointee will need access to any of the following:

[Box]Blackboard [Box]Dept G:Drive (Specify Folders on Section 3) [Box]Email [Box]Box File Sharing (optional)

Sponsor's Signature: Date:  
Dept. Chair's Signature: Date:  
Ewell Dean's Signature: Date:

**PLEASE NOTE: ATTACH A CURRENT CV TO ALL REQUESTS AND ALL BLANKS MUST BE FILLED OUT IN ORDER TO PROCESS THIS REQUEST**