

REQUEST FOR A REVIEW BY THE UNIT COMMITTEE  
(Fully-promoted faculty members only)

In addition to the annual review for the 2025-26 cycle to be conducted by the Chairperson/Division Director of the Department/School, I wish to also have an annual review for the same cycle by the peer evaluation committee.

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Print Name)

\_\_\_\_\_  
(Date)

Acknowledged:

\_\_\_\_\_  
(Chair/Director)

\_\_\_\_\_  
(Date)