
Tarleton State University
Emeritus Nomination Form

NOMINEE INFORMATION

Name of nominee: _____

Total number of years of service to Tarleton State University: _____

Rank at retirement: _____

Emeritus title requested: (ex: Professor Emeritus of English) _____

Academic Department/College of nominee at retirement: _____

NOMINATOR INFORMATION

Name of nominator: _____

Email address of nominator: _____

Contact number for nominator: _____

Recommended Approval:

Department Head

Date

Dean

Date

Provost

Date