

RELEASE OF INFORMATION FORM FOR PERIODIC REVIEW

Senior Lecturer in SSRA

Candidate's Name: _____

Deadline Date: Please return this completed and signed form to Laurie Doohan in the Office of the Provost and Dean of Faculty by **Monday, January 15, 2024.**

- Requirements:**
- ✓ Student course evaluations from all classes taught at Whitman since the last contract, promotion, or periodic review.
 - ✓ It is essential that you list each course number and title.
 - ✓ Please **DO NOT write in "all courses."**

I hereby grant permission to the Director of Institutional Research Office to provide the Provost and Dean of the Faculty Office of Whitman College results of the student course evaluations for the following courses.

It is my understanding that these evaluations will be utilized as specified in the faculty evaluating policies and procedures in the Faculty Handbook and will be treated as confidential documents, to be distributed by the Provost and Dean of Faculty Office to appropriate persons for evaluative purposes only.

Signature of Candidate: _____

Date signed: _____

Semester / Year	Course #	Course Title

