



PLEASE NOTE
Part "A" - To be completed by
nominating institution

2010

PIPER PROFESSOR NOMINATION

Name of College/University/Institute

Address of Institution

Zip

Type of Institution: (As defined by Coordinating Board)

Public Senior Public Community/Jr. Public Technical Inst. Independent Senior Independent Junior

Name of Piper Professor Nominee

Highest Degree Held
(Abbreviated Form)

Rank/Title of Nominee and Department

Years of Teaching at College Level _____ Years of Teaching at Present Institution _____

Current Teaching Load : Lecture Hours/Week _____; Lab Hours _____; Other _____*

Approximate No. Students : Undergraduate _____; Graduate _____; Other _____*

Standard Full-Time Teaching Load at your Institution: Undergraduate _____; Graduate _____

Summer Teaching: _____

* Other = Conference courses; Theses/Dissertations Directed; Misc. (Describe in next section)

Please describe current additional or administrative duties, i.e., Chairman of Department, Graduate Advisor, Thesis/Dissertation Director, etc., giving numbers of Professors/Students involved and approximate number of hours devoted thereto.

Student Organizations or Scholastic Fraternities Sponsored: (during past three years).

Membership in Honor Societies; Professional Societies; Listing in Who's Who or Other;
Special Educational Projects Undertaken (TV series, etc.), Special Awards/Grants Received:

Service to off-campus community: (committee work, church work, fund drives, Scouts, etc.)



PLEASE NOTE
Part "B" - To be completed
by Nominee

2010

PIPER PROFESSOR NOMINATION

PERSONAL INFORMATION

Name () Dr. () Mr. () Mrs. () Miss _____
First Middle Last

Home Address _____
Number and Street

_____ City Zip Telephone

College/University Address _____
Name of Institution

_____ Building and Office Telephone and Extension

Rank/Title and Department _____

Date of Birth: _____ Place of Birth: _____ Soc.Sec.#: _____

Marital Status: _____ Number of Children: _____ Ages: _____

Military Service Record: Branch: _____ Dates: _____ Rank _____

EDUCATIONAL EXPERIENCE: Schools and Colleges Attended, beginning with High School

Name of Institution	Dates of Attendance	Degree/Diploma Received
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Additional Training (Summer Institutes, Seminars, etc.)

Institution	Dates of Attendance	Type of Training

TEACHING EXPERIENCE:

Institution	Inclusive Dates	Title/Rank

PUBLICATIONS: Although the Selection Committee is not primarily concerned with "Research /Publish or Perish," please summarize any research projects completed, and list any books/articles published and/or in use, exclusive of your Master's Thesis and/or Doctoral Dissertation. (Continue on reverse side if necessary)
