CANDIDATE'S CERTIFICATION FOR ACADEMIC PERSONNEL REVIEW FILE <u>AFTER</u> DETERMINATION OF DEPARTMENTAL RECOMMENDATION

I Certify	That:			
•	■ I was informed of the departmental recommendation. ☐Yes ☐No			
•	 I was provided the opportunity to inspect all non-confidential material (including the departmental recommendation letter) in my academic review file. \(\subseteq Yes \subseteq No \) I was provided the opportunity to request redacted copies of confidential material (if any in my academic review file. \(\subseteq Yes \subseteq No \) 			
•				
•	■ I was provided the opportunity to include a written statement regarding the departmental recommendation and/or other file materials. ☐Yes ☐No			
Signature			Date	
Items/S	tatement I have added:			
			_	
Initials		Date		