ATTACHMENT H
Interim Faculty Recruitment Report
Appalachian State University
Office of Human Resources

Form 2a

1. Department/Unit ___________________________  2. College/School/Division ___________________________

3. Title and Position Number _______________________________________________________________

4. EHRA category of position (Check one only)
   □ Administrator  □ Tenured/Tenure-Track Faculty
   □ Professional, without
   Academic Rank  □ Non-Tenure-Track Faculty

5. Total number of applications received ______  6. Number excluded from further consideration ______

7. Application Flow: Check to indicate that Applicant Flow Form is attached. □
   Using the Applicant Flow Form, provide the name and application date of each applicant. Specify the disposition for
each applicant by indicating the corresponding code from the applicant disposition codes listed on the Applicant Flow
Form.

8. List all candidates still under consideration. (i.e., candidates on the short list) □
   Check here if additional list is attached.

   Name: (check box if inviting for on-campus interview)
   
   1. ___________________________________  ____________________________________________ □
   2. ___________________________________  ____________________________________________ □
   3. ___________________________________  ____________________________________________ □
   4. ___________________________________  ____________________________________________ □
   5. ___________________________________  ____________________________________________ □
   6. ___________________________________  ____________________________________________ □
   7. ___________________________________  ____________________________________________ □
   8. ___________________________________  ____________________________________________ □

   Current Employer Indicate if current Appalachian
   Employee (specify the following: SHRA/EHRA, department
   and position title)

9. By signing, we certify that the information provided above and on the Applicant Flow Form is accurate.
   Furthermore, we understand that no candidates may be interviewed until this form is approved by the director
   of compliance.

   __________________________________________________________________________
   Search Committee Chair ___________________________ Date ___________________________

   __________________________________________________________________________
   Human Resources ___________________________ Date ___________________________

Approved form will be returned to the search committee chair by HR. 09/2018