This document establishes the guidelines for clinical ranks for the Purdue School of Engineering and Technology, IUPUI. This document is supplemental to the administrative policies of Indiana University as documented in the Indiana University Academic Handbook. In particular, this document establishes School guidelines where called for by the Academic Handbook, and it establishes School guidelines where additional measures are promulgated by the School. Also, upon adoption of the guidelines stated in this document by the School senate, this document will be adopted as an addendum to the E&T Promotion & Tenure Guidelines for guidelines for promotion of clinical rank appointments.

The policy stated in the Indiana University Academic Handbook regarding clinical ranks is provided in Attachment A (and for future reference should be updated to the current version). In addition to IU policy, the School of E&T establishes these additional guidelines for academic instructional appointments of full-time clinical rank faculty.

In the School of Engineering and Technology, clinical faculty members may be responsible for civic engagement that supports their teaching and service. The type, level, and scope of all of their service will be determined on a departmental basis at the time of an initial appointment. The primary duties of faculty members holding clinical rank in the School of Engineering and Technology are teaching and providing professional services such as service to students, the department, the school, the university, the community, and professional associations. Appropriate teaching load and service requirements will be determined by the faculty member’s department chair with approval from the Dean in conformance with the school’s workload policy.

1. **Term of Appointment.** The initial appointment for clinical appointments shall be one or two years during a probationary period of not more than seven years. After promotion to Associate Clinical Professor, the typical length of contract will be five years.

2. **Termination Notice Due.** The termination notice shall be announced to the appointee in a time frame consistent with campus policies.

3. **Ongoing Reviews.** During the probationary period, the chair of the department and the departmental primary committee shall review the appointee annually. The appointee shall supply the faculty annual summary report for this purpose.

After the 3rd and 5th year of the initial appointment, the departmental primary committee and the school’s unit committee shall review the appointee. The unit committee’s recommendations will be sent to the campus Dean of Faculty for review.

After promotion to associate clinical professor, the departmental primary committee shall review the appointee every five years. Clinical faculty members at the rank of full clinical professor are not subject to these five-year reviews.

After a successful 5th year review without promotion, 2- to 3-year contracts will be the norm. After promotion to associate clinical professor and/or full clinical professor, 5-year contracts will be the norm.

4. **Promotion.** Consistent with the Appointment and Advancement section of the IU Handbook, the promotion procedure is in accordance with the E&T Promotion & Tenure Guidelines for tenure-track positions. Promotion will go through the normal tenure-line faculty procedures.
used in the school. While the probationary period may extend to seven years, individuals in special circumstances may wish to apply for promotion earlier than usual.

5. **Criteria for evaluation.** Continued appointment and promotion in rank is based on excellent performance in either teaching or service with satisfactory performance in the other. Criteria for evaluating performance in teaching are identical to those for tenure-line faculty. Criteria for evaluating performance in service are also identical but with one exception; at the time of promotion consideration, a peer review of service will be completed by members of the Center for Service Learning or other appropriate individuals.

In accordance with the IU Handbook, the clinical rank faculty member shall not be evaluated in the area of research. Clinical faculty members may contribute to the research efforts of a unit through their clinical work, but they are not expected to conduct discipline-specific individual research. In a promotion case, any research should be shown to contribute to the faculty member’s teaching and/or service responsibilities.

(Upon adoption of these guidelines by the E&T Faculty Senate, people currently in Clinical positions will follow these guidelines when they seek promotions. However, if the nature of their work varies from what is stated here, they should confer with their chair and the dean about their cases for promotion.)

Submitted by the Faculty Affairs Committee: Yaobin Chen, Hazim El-Mounayri, Patrick Gee, Clifford Goodwin, Marjorie Rush Hovde (Chair), Brian Kinsey, G. David Peters, and Hiroki Yokota.
Appendix A: 2008 IU Handbook Material on Clinical Faculty, p. 81-83

Use of Clinical Appointments
Clinical appointments are appropriate for those who work primarily in the clinical setting. Clinical faculty may be involved in research that derives from their primary assignment in clinical teaching and professional service; however, continued appointment and advancement in rank must be based on performance in teaching and service.

[EXPLANATION AND COMMENT: Clinical appointees teach and practice full-time in the clinical professional setting. It follows that clinical appointments will be limited to academic units (and departments within academic units) in the professional-client service disciplines. Clinical faculty may contribute to the research efforts of a unit through their clinical work, but they are not expected to do individual research. Faculty who, in addition to teaching and service, have portions of their time allocated to doing research for which they are a principal or co-principal investigator, who have research laboratories, or who are otherwise expected to do individual research should be in tenured/tenure probationary positions. While individual faculty members hired in tenure-probationary appointments may switch to the clinical appointments during the first five years of their probationary period, such a switch must involve giving up the research component of their faculty work, except for their clinical role in collaborative research trials. Clinical appointments are not intended as a means of retaining tenure-probationary faculty members who will not be able to demonstrate the performance levels in teaching, research, and service required for the granting of tenure.]

Rights and Privileges
Clinical faculty are expected to follow and be protected by University policies, including those pertaining to faculty hiring and faculty annual reviews. The faculty salary policies of the University, campus, school, and department shall apply to clinical faculty. Clinical faculty have the right to petition the campus faculty board of review. Clinical faculty are not eligible for University sabbatical leave, but schools may provide sabbatical-like leaves for their clinical faculty to provide opportunities for professional learning and collaboration with colleagues. Participation in University and campus faculty governance is governed by the Constitution of the Faculty of Indiana University and the faculty constitutions on each campus. The role of clinical faculty in governance within the unit shall be determined by vote of the tenured and tenure-probationary faculty of the unit, provided that where non-tenure track appointees have voting privileges, their voting participation must be structured in a way that reserves at least 60% of voting weight to tenure track faculty. The academic integrity of the school and its programs ultimately is the responsibility of tenured and tenure-probationary faculty. The rights of clinical faculty and the regulations concerning their roles within each school shall be written and available to the school faculty. A copy of all rights and regulations shall be filed with the campus academic officer and with the campus faculty governance body.

[EXPLANATION AND COMMENT: The University Faculty Constitution defines the voting faculty as “all faculty members on tenure or accumulating credit toward tenure.” The Constitution further states that “the voting members of individual campuses may extend voting privileges to others on matters of individual campus significance.” The rationale for the distributions of rights and privileges is to leave the responsibility for the preservation of the most basic academic interests of the institution in the hands of those with the greatest protection of their academic freedom for the purposes of teaching, research, and service including the service of faculty governance; i.e., those with tenure. Non-tenure track appointees otherwise should have as many faculty privileges as is consistent with their qualifications and responsibilities.]

Clinical faculty are not eligible for academic administrative appointments at and above the department chair level.

[EXPLANATION AND COMMENT: The integrity of the academic programs will be best served by requiring that those individuals holding administrative appointments with direct authority for academic programs have the full range of academic qualifications associated with the tenure track, as well as the fuller protection of academic freedom that tenure provides.]
Appointment and Advancement
The faculty of each unit using clinical appointments shall decide whether those appointments will be with the titles of Clinical Professor, Associate Clinical Professor and Assistant Clinical Professor, or Clinical Senior Lecturer and Clinical Lecturer. Initial clinical appointments should be at the level appropriate to the experience and accomplishments of the individual. The process for appointment with probationary status or appointment with a long-term contract shall go through the ordinary procedures for faculty appointments. Promotion in rank of Assistant and Associate Clinical Professors should go through the normal faculty procedures appropriate to the unit of the university, including peer review by the primary unit, and campus promotion (and tenure) committees. The faculty of each unit using Assistant and Associate Clinical Professor appointments shall adopt criteria for promotion that are appropriate to the duties that may be assigned to clinical appointees. Those criteria must be written, available to unit faculty, and filed with the campus academic officer. Clinical Lecturers shall be promoted to Clinical Senior Lecturers upon their being appointed to long-term contracts following a probationary period.

Protection of Academic Freedom
Clinical appointees are not eligible for tenure; however, in order to protect their academic freedom, individuals appointed as clinical faculty shall be given long-term contracts after a probationary period of not more than seven years. The exact mechanism for this shall be determined by the dean and the faculty governance body within each school using clinical appointments and be approved by the chancellor, but the mechanism should be a long-term contract of not less than five years or be some equivalent, such as a rolling three-year contract. The criteria for granting long-term contracts after a probationary period shall be analogous to the criteria for granting tenure, except that clinical faculty shall earn the right to a long-term contract on the basis of their excellence only in those responsibilities that may be assigned to them. Each school will establish procedures and specific criteria for review of individuals concerning the renewal of long-term contracts or their equivalent.

Clinical faculty appointments during the probationary period shall be subject to the same policies and procedures with respect to appointment, reappointment, non-reappointment, and dismissal as apply to tenure-probationary faculty during the probationary period. After the probationary period, dismissal of a clinical faculty member holding a longer-term contract which has not expired may occur because of closure or permanent downsizing of the program in which the faculty member teaches and serves; otherwise, dismissal of such clinical faculty shall occur only for reasons of professional incompetence, serious misconduct, or financial exigency. Non-reappointment of clinical faculty to a new contract term may occur for the foregoing reasons or may occur as well for reason of changing staffing needs of the clinical program. Non-reappointment decisions regarding clinical faculty holding a long-term contract after the probationary period must be made with faculty consultation through processes established by the school’s faculty governance institutions. The jurisdiction of campus faculty grievance institutions includes cases of dismissal and non-reappointment of clinical faculty.

/EXPLANATION AND COMMENT: Probationary periods for part-time faculty may be longer than seven years, where regulations adopted by the faculty of the academic unit so provide. University practice requires that probationary periods be served on a continuing basis unless a leave of absence has been applied for and been granted. The University is not obliged to relocate within the institution clinical faculty whose positions are eliminated because of closure, permanent downsizing, or changing staffing needs of their clinical programs. Where an instructional line is converted from non-tenure to tenure track, a clinical faculty member occupying the line may apply for the tenure-track position, but is not guaranteed appointment."

(University Faculty Council, February 13, 2001; Board of Trustees, May 4, 2001)