Internal Guidelines for faculty appointments and promotions

UPDATED SEPTEMBER 2017
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The following are Mailman School of Public Health Department of Epidemiology guidelines for appointments and promotions. These guidelines generally represent the minimal level of achievement expected before a faculty member will be considered for promotion. The intention in presenting these guidelines is to help faculty in considering their own trajectory and achievements against a set of commonly understood expectations.

However, achievement of these markers does not in any way guarantee that a faculty member will be proposed for promotion, nor that promotion will be granted by the relevant committees. In evaluating any candidate for potential promotion, the Department Chair, and relevant committees (departmental COAP, school-wide COAP, CUMC COAP, and University-wide committee) will use their discretion, considering the candidates’ track record broadly and her/his promise as a scholar. For example, it is possible that a candidate with fewer publications than listed, but with a small number of groundbreaking publications, would be viewed very favorably for promotion. Similarly, the slope of the H-index, m, can be considered as a marker of promise, separately from the absolute H-index noted here.

These guidelines are not meant to represent the official policies of the Mailman School, the Columbia University Medical Center, or Columbia University at large. They were developed by the Epidemiology COAP in response to faculty requests for transparency and consistency in the appointment and promotions process.

This version of the guidelines reflects the 2013 changes in CUMC faculty titles. Briefly, these changes eliminate the use of the clinical modifier for full time faculty and stipulate two major academic tracks, as follows: “unmodified tenured or tenure track” and “non-tenure track.” Non-tenure track faculty will be designated with the “at CUMC” title.

Note that part time faculty are not affected by the new CUMC title guidelines. Appointment and promotion guidelines for part time faculty, including both those with adjunct titles and with clinically modified titles, can be found in section 4 of this guide.

**Full time faculty tracks as of January 1, 2014:**

Within the non-tenure, or “at CUMC” track, there are three areas of scholarly focus:

1. Investigation
2. Educational scholarship and leadership
3. Applied health care and public health sciences

As such, within each faculty rank, there are a total of four pathways:

4. Tenured/tenure track
5. Non-tenure track with a focus on investigation
6. Non-tenure track with a focus on applied healthcare and public health sciences
7. Non-tenure track with a focus on educational scholarship and leadership
Criteria: Assistant Professor

**TENURE TRACK**

Must meet minimum criteria below and demonstrate promise for distinction in research/scholarship and teaching/mentoring, service, and leadership in the field.

**I. Research and scholarship**

Publications: Several peer-reviewed publications, at least one as first author.

Grants: Potential ability and intent to obtain significant peer-reviewed grant support.

**II. Teaching and mentoring**

Teaching: Must have demonstrated excellence in teaching and have planned role for teaching own course.

Mentoring: N/A

**III. Service and practice engagement**

Citizenship: Must have a plan for engagement in the life of the Department, i.e., plan or participation in activities considered essential to the teaching, research, or programmatic goals of the Department.

[AS APPLICABLE] Practice: Engagement in national public health service, i.e., activities that directly affect the health of the public.

**IV. Leadership in the field**

Outstanding recommendations from prior mentors.

**NON-TENURE TRACK**

Investigator focus

Must meet minimum criteria below and demonstrate promise for achievement in research/scholarship.

**I. Research and scholarship**

Publications: Several peer-reviewed publications.

Grants: Potential ability and intent to obtain significant peer-reviewed grant support.

**II. Teaching and mentoring**

Teaching: Must have demonstrated excellence in teaching and have planned role for teaching own course, or assisting in a course.

Mentoring: N/A

**III. Service and practice engagement**

Citizenship: Must have a plan for engagement in the life of the Department, i.e., plan or participation in activities considered essential to the teaching, research, or programmatic goals of the Department.

[AS APPLICABLE] Practice: Engagement in national public health service, i.e., activities that directly affect the health of the public.

**IV. Leadership in the field**

Very strong recommendations from prior mentors.
Criteria: Assistant Professor

**NON-TENURE TRACK**
Applied public health focus

Must meet minimum criteria below and demonstrate promise of achievement in public health service/practice.

I. Research and scholarship
Publications: Several peer-reviewed publications or equivalent track record of publication in books and reports.
Grants: Potential ability and intent to obtain, or play a significant role in obtaining, peer-reviewed grant support is highly desirable.

II. Teaching and mentoring
Teaching: Must have demonstrated competence in teaching and have planned role for co-teaching or lecturing in a course or workshop.
Mentoring: N/A

III. Service and practice engagement
Citizenship: Must have a plan for engagement in the life of the Department, i.e., plan or participation in activities considered essential to the teaching, research, or programmatic goals of the Department.
Practice: Engagement in national public health service, i.e., activities that directly affect the health of the public. Participation in, or potential for participation in, guideline/quality assurance or public health intervention or outreach panels and writing groups.

IV. Leadership in the field
Very strong recommendations from prior mentors. Developing recognition for expertise in applied public health.

**NON-TENURE TRACK**
Educational scholarship and leadership focus

Must meet minimum criteria below and demonstrate promise of achievement in teaching/mentoring.

I. Research and scholarship
Publications: Several peer-reviewed publications or equivalent track record of publication in the area of educational scholarship and leadership.
Grants: Potential ability and intent to obtain peer-reviewed grant support is highly desirable.

II. Teaching and mentoring
Teaching: Development or clear potential for development of teaching materials, including new curriculum offerings, educational programs, textbooks chapters, syllabi, computer programs, or videotapes that improve the method or quality of instruction in didactic or small group settings. Demonstrated excellence and/or promise of excellence in teaching and have planned role for teaching own course. Evidence of skills and potential for leadership in the educational arena.
Mentoring: N/A

III. Service and practice engagement
Citizenship: Must have a plan for engagement in the life of the Department, i.e., plan or participation in activities considered essential to the teaching, research, or programmatic goals of the Department.

IV. Leadership in the field
Very strong recommendations from prior mentors.
Criteria: Associate Professor

TENURE TRACK

Must meet minimum criteria below and demonstrate distinction in research/scholarship, teaching/mentoring, citizenship, and leadership in the field.

I. Research and scholarship

Publications: 30 peer-reviewed publications, 10 as first or senior author. Where relevant, corresponding author may be equivalent to senior author. At least 3 of the first authored publications should be in major general or specialty journals. H-index of at least 15.

Grants: At least one R01 or equivalent. Other grants are helpful, especially program projects or center grants.

II. Teaching and mentoring

Teaching: Must have own course or major role in a major course. Student evaluations demonstrating highly effective teaching and well developed courses.

Mentoring: Clear record of successful mentoring of master’s and pre- and postdoctoral trainees.

III. Service and practice engagement

Citizenship: Helpful and contributes to the life of the Department. Participation in activities considered essential to the teaching, research, or programmatic goals of the Department. Academic citizenship demonstrated by service on departmental, University, local, and national organization committees and/or leadership in University/national professional organizations. Community education is also considered in this category.

[AS APPLICABLE] Practice: Clear evidence of national public health service, i.e., activities that directly affect the health of the public.

IV. Leadership in the field

Evidence of service on national committees, policy-making bodies, major organizations, editorial boards, study sections and the like. Honors and leadership in regional or national professional societies. Invited lectureships relating to the discipline on a national or international level. Letters should demonstrate an outstanding national reputation as a leader in a specific field.

NON-TENURE TRACK

Investigator focus

Must meet minimum criteria below and demonstrate substantial achievement in research/scholarship.

I. Research and scholarship

Publications: 30 peer-reviewed publications, some in major general or specialty journals. H-index of at least 15.

Grants: PI of at least one R01 or equivalent or demonstrated significant role in multiple extramurally funded projects.

II. Teaching and mentoring

Teaching: Must have own course or major role in a major course. Student evaluations demonstrating effective teaching.

Mentoring: Clear record of successful mentoring of master’s and pre- and postdoctoral trainees.

III. Service and practice engagement

Citizenship: Helpful and contributes to the life of the Department. Participation in activities considered essential to the teaching, research, or programmatic goals of the Department. Academic citizenship demonstrated by service on Department, University, local, and national organization committees and/or leadership in University/national professional organizations. Community education is also considered in this category.

[AS APPLICABLE] Practice: Clear evidence of national public health service, i.e., activities that directly affect the health of the public.

IV. Leadership in the field

Evidence of service on national committees, policy-making bodies, major organizations, editorial boards, study sections and the like. Honors and leadership in regional or national professional societies. Invited lectureships relating to the discipline on a national or international level. Letters should demonstrate a strong national reputation as leader in a specific field.
Criteria: Associate Professor

**NON-TENURE TRACK**

**Applied public health focus**

Must meet minimum criteria below and demonstrate substantial achievement in service/practice.

**I. Research and scholarship**

Publications: 30 peer-reviewed publications, some in major general or specialty journals. An equivalent publication record in influential books and reports may be substituted. H-index of at least 15, if relevant.

Grants: Substantial role(s) on own and/or other faculty's grants highly desirable.

**II. Teaching and mentoring**

Teaching: Must make a substantial contribution to teaching through own course, or assisting in a major course. Student evaluations demonstrating effective teaching and well developed courses.

Mentoring: Clear record of successful mentoring of master's and pre- and postdoctoral trainees.

**III. Service and practice engagement**

Citizenship: Helpful and contributes to the life of the Department. Participation in activities considered essential to the teaching, research, or programmatic goals of the Department. Academic citizenship demonstrated by service on Department, University, local, and national organization committees and/or leadership in University/national professional organizations. Community education is also considered in this category.

Practice: Clear evidence of distinguished national public health service, i.e., activities that directly affect the health of the public.

**IV. Leadership in the field**

Development of guidelines for public health protocols that are used locally, regionally, or nationally. Development of or leading the application of clinical or public health technology that changes practice. Honors and leadership in regional or national professional societies, committees, policy-making bodies, major organizations, editorial boards, study sections and the like. Substantial contributions to institutional, local, regional, national or international programs. Letters should demonstrate a strong national reputation as leader in applied public health.

**NON-TENURE TRACK**

**Educational scholarship and leadership focus**

Must meet minimum criteria below and demonstrate substantial achievement in teaching/mentoring.

**I. Research and scholarship**

Publications: 30 peer-reviewed publications, some in major general or specialty journals, or equivalent track record of publication in the area of educational scholarship and leadership. H-index of at least 15, if relevant.

Grants: Substantial role(s) on own and/or other faculty's grants highly desirable.

**II. Teaching and mentoring**

Teaching: Development of educational materials, including new curricular offerings, educational programs, textbook chapters, syllabi, computer programs, videotapes or simulation technology that make a unique contribution and represent significant improvement in the quality and methods of education. Must have own course or major role in a major course. Student and peer evaluations demonstrating teaching excellence and well developed courses over a sustained period of time. Demonstrated skills and leadership in the educational arena.

Mentoring: Clear record of successful mentoring of master's and pre- and postdoctoral trainees.

**III. Service and practice engagement**

Citizenship: Helpful and contributes to the life of the Department. Participation in activities considered essential to the teaching, research, or programmatic goals of the Department. Academic citizenship demonstrated by service on Department, University, local, and national organization committees and/or leadership in University/national professional organizations. Community education is also considered in this category.

Practice: Clear evidence of distinguished national public health service, i.e., activities that directly affect the health of the public.

**IV. Leadership in the field**

Evidence of concentration in educational leadership/scholarship as demonstrated by regional or national recognition of educational expertise, invited lectureships, publications related to education, and membership on education-focused editorial boards. Letters should demonstrate a strong national reputation as a leader in the educational arena.
Criteria: Full Professor

**TENURE TRACK**

Must meet minimum criteria below and demonstrate distinction in research/scholarship, teaching/mentoring, citizenship, and leadership in the field.

**I. Research and scholarship**

Publications: 60 peer-reviewed publications, 30 as first or senior author. Where relevant, corresponding author may be equivalent to senior author. At least 10 of the first or senior authored publications should be in major general or specialty journals. Clear evidence of sustained productivity in scholarly publications. H-index of at least 25.

Grants: At least one current R01 or equivalent. Strong history (both recent and past) of success in acquiring peer reviewed funding. Other grants are helpful, especially program projects or center grants.

**II. Teaching and mentoring**

Teaching: Must have own course or major role in a major course. Sustained record of student evaluations demonstrating effective teaching and/or well developed courses.

Mentoring: Clear record of successful mentoring of master’s and pre- and postdoctoral trainees as well as successful mentoring of junior faculty.

**III. Service and practice engagement**

Citizenship: Helpful and contributes to the life of the Department. Participation in activities considered essential to the teaching, research, or programmatic goals of the Department. Academic citizenship demonstrated by service on Department, University, local, and national organization committees and/or leadership in University/national professional organizations. Community education is also considered in this category.

[AS APPLICABLE] Practice: Clear evidence of national and international public health service, i.e., activities that directly affect the health of the public.

**IV. Leadership in the field**

Evidence of service on national committees, policy-making bodies, major organizations, editorial boards, study sections and the like. Honors and leadership in regional or national professional societies. Invited lectureships relating to the discipline on a national or international level. Letters should demonstrate an outstanding national and/or international reputation as a leader in a specific field.

**NON-TENURE TRACK**

Investigator focus

Must meet minimum criteria below and demonstrate substantial achievement in research/scholarship.

**I. Research and scholarship**

Publications: 60 peer-reviewed publications, some in major general or specialty journals. Clear evidence of sustained productivity in scholarly publications. H-index of at least 25.

Grants: PI of at least one R01 or equivalent or demonstrated significant role in multiple extramurally funded projects.

**II. Teaching and mentoring**

Teaching: Must have own course or major role in a major course. Sustained record of student evaluations demonstrating effective teaching and/or well developed courses.

Mentoring: Clear and sustained record of successful mentoring of master’s and pre- and postdoctoral trainees as well as successful mentoring of junior faculty.

**III. Service and practice engagement**

Citizenship: Helpful and contributes to the life of the Department. Participation in activities considered essential to the teaching, research, or programmatic goals of the Department. Academic citizenship demonstrated by service on Department, University, local, and national organization committees and/or leadership in University/national professional organizations. Community education is also considered in this category.

[AS APPLICABLE] Practice: Clear evidence of distinguished national and international public health service, i.e., activities that directly affect the health of the public.

**IV. Leadership in the field**

Evidence of service on national committees, policy-making bodies, major organizations, editorial boards, study sections and the like. Honors and leadership in regional or national professional societies. Invited lectureships relating to the discipline on a national or international level. Letters must demonstrate national and international recognition of leadership in the relevant areas.
Criteria: Full Professor

**NON-TENURE TRACK**

**Full Professor**

Applied public health focus

Must meet minimum criteria below and demonstrate substantial achievement in service/practice.

I. Research and scholarship

Publications: 60 peer-reviewed publications, some in major general or specialty journals. An equivalent publication record in influential books and reports may be substituted. Clear evidence of sustained productivity in scholarly publications. H-index of at least 25, if relevant.

Grants: Substantial role(s) on own and/or other faculty’s grants highly desirable.

II. Teaching and mentoring

Teaching: Must have own course or major role in a major course. Student evaluations demonstrating effective teaching and/or well developed courses.

Mentoring: Clear record of successful mentoring of master’s and pre- and postdoctoral trainees as well as successful mentoring of junior faculty.

III. Service and practice engagement

Citizenship: Helpful and contributes to the life of the Department. Participation in activities considered essential to the teaching, research, or programmatic goals of the Department. Academic citizenship demonstrated by service on Department, University, local, and national organization committees and/or leadership in University/national professional organizations. Community education is also considered in this category.

Practice: Clear evidence of distinguished national and international public health service, i.e., activities that directly affect the health of the public.

IV. Leadership in the field

Development of guidelines for public health protocols that are used locally, regionally, or nationally. Development of or leading the application of clinical or public health technology that changes practice. Honors and leadership in regional or national professional societies, committees, policy-making bodies, major organizations, editorial boards, study sections and the like. Substantial contributions to institutional, local, regional, national or international programs. Letters should demonstrate a strong national reputation as leader in applied public health.

**NON-TENURE TRACK**

**Full Professor**

Educational scholarship and leadership focus

Must meet minimum criteria below and demonstrate substantial achievement in teaching/mentoring.

I. Research and scholarship

Publications: 60 peer-reviewed publications, some in major general or specialty journals, or equivalent track record of publication in the area of educational scholarship and leadership. H-index of at least 25, if relevant.

Grants: Sustained record of substantial role(s) on own and/or other faculty’s grants highly desirable.

II. Teaching and mentoring

Teaching: Development of educational materials, including new curricular offerings, educational programs, textbook chapters, syllabi, computer programs, videotapes or simulation technology that make a unique contribution and represent significant improvement in the quality and methods of education. Must have own course or major role in a major course. Student and peer evaluations demonstrating teaching excellence and well developed courses over a sustained period of time. Demonstrated skills and sustained leadership in the educational arena.

Mentoring: Clear record of successful mentoring of master’s and pre- and postdoctoral trainees as well as successful mentoring of junior faculty.

III. Service and practice engagement

Citizenship: Helpful and contributes to the life of the Department. Participation in activities considered essential to the teaching, research, or programmatic goals of the Department. Academic citizenship demonstrated by service on Department, University, local, and national organization committees and/or leadership in University/national professional organizations. Community education is also considered in this category.

[AS APPLICABLE] Practice: Clear evidence of national and international public health service, i.e., activities that directly affect the health of the public.

IV. Leadership in the field

Development of innovative educational methodologies or materials which have influence and impact regionally, nationally or internationally. Evidence of concentration in educational leadership/scholarship as demonstrated by regional or national recognition of educational expertise, invited lectureships, publications related to education, and membership on education-focused editorial boards. Letters should demonstrate a strong national reputation as a leader in the educational arena.
While the 2013 policy changes for CUMC faculty titles eliminate the clinical modifier for full time faculty, part time faculty with clinically modified titles will be permitted to keep them.

Some of our part time faculty are designated with formal “adjunct” titles, others with clinically modified titles.

For the sake of simplicity, in considering promotions for our existing part time faculty, we will broadly reference the guidelines we have established for non-tenure track full time faculty.
Procedures and timelines

**STEPS FOR APPOINTMENT TO ASSISTANT PROFESSOR**
(Additional steps necessary for joint or interdisciplinary appointments are noted in *italics*)

1. Generally takes 3 - 4 months

2. Nomination for appointment:
   - Requires initial approval of Chair. Candidates should submit the following and **meet with Chair:**
     - COAP format CV. See Appendix A for format guidelines.
     - Up to 4 page personal statement that addresses the arc of the nominee's career and describes the nominee's current research and teaching and plans for future projects, including role in the Department. See Appendix B for more detail.
   - All new appointments require that the candidate give a special lecture in the department.
   - If joint or interdisciplinary, the home department chair writes to the secondary department chair(s) in support of appointment. If secondary chair concurs, s/he indicates this in a return letter to primary chair.

3. The Epidemiology Committee on Appointments and Promotions conducts the review:
   - A faculty member familiar with the nominee's research summarizes her/his accomplishments to the committee.
   - CV, statement, and teaching evaluations (if applicable) are reviewed.
   - An open vote is taken. Note: for nominations to Assistant Professor on the tenure-track, only tenured members of the COAP are eligible to vote. A quorum consisting of four or more Epi COAP members will be required for consideration of all appointments. For appointments to tenure-track titles, a quorum consisting of four or more tenured Epi COAP members will be required. COAP members may vote by email, if necessary.

4. All COAP votes are advisory and recommendations to the Department Chair who ultimately decides on advancing faculty for promotion.

5. If joint/interdisciplinary, approval is also obtained from the other department(s) to appoint.

6. If joint/interdisciplinary, Memorandum of Agreement between departments is drafted, finalized and signed.

7. Upon approval of both departments, the hiring process is initiated in the home department.
   - For salaried appointments
     - If the position has not yet been posted:
       1. Salary, funding source, space, and resources are established and submitted to MSPH salary review committee for approval.
       2. Job posting is developed and posted in RAPS and in an approved journal for 30 days.
       3. All applicants are reviewed; a minimum of 3-4 are interviewed. Results of interviews are coded, selectee submitted to faculty affairs for affirmative action approval.
       4. Chair letter (*from each department*), personal data, I-9, tax forms, and CV are submitted to faculty affairs for final approval. Actual data entry can take two weeks to a month.
   - For non-salaried appointments
     - Chair letter, personal data, and CV are submitted to faculty affairs for final approval.
     - Actual data entry can take two weeks to a month.
Procedures and timelines

STEPS FOR PROMOTION TO ASSOCIATE OR HIGHER,
EXCLUDING NOMINATIONS TO TENURE
(Additional steps necessary for joint or interdisciplinary appointments are noted in italics)

1. Can take a year or longer. Joint/interdisciplinary promotions take longest, given the need for 1) two or more chairs to agree on nomination, MOA, and referee list, 2) two or more departmental COAPS to schedule and approve, and 3) two or more school level COAPS to schedule and approve.

2. Faculty members seeking promotion submit the following and meet with chair prior to December 31 to obtain initial approval
   A. COAP format CV. See Appendix A for format guidelines.
   B. Up to 4 page personal statement that addresses the arc of the nominee’s career and describes the nominee’s current research and teaching and plans for future projects, including role in the Department. See Appendix B for more detail.
   C. Copies of teaching evaluations
   D. Copies of 5 scholarly publications that best characterize their work.

If joint or interdisciplinary, the home department chair writes to the secondary department chair(s) in support of promotion. If secondary chair concurs, s/he indicates this in a return letter to primary chair.

3. Epi chair conducts initial review to determine whether to go out for letters. The chair then presents the candidate's dossier to COAP, who vote on whether or not to go forward.

4. If joint/interdisciplinary, approval is also obtained from the other department(s) to go out for letters.

5. If joint/interdisciplinary, a memorandum of agreement (MOA) between the departments is drafted, reviewed by each department and by faculty affairs, then circulated for signatures.

6. A referee list is developed. The list should be between 12 – 15 academics at or above the rank that is being sought. A maximum of two referees can be affiliated with Columbia University. (For nominations to tenure – documented separately- no Columbia affiliated referees are permitted.) Referees should be drawn from multiple institutions in the US and internationally to demonstrate the nominee’s standing in his/her field. The chair and/or one or more senior faculty members review and finalize the referee list. For joint or interdisciplinary appointments, there is input from both departments in the development of the list.

7. Referee letters are sent, accompanied by the nominee’s CV, personal statement, and a copy of the Columbia Appointment and Promotion Guidelines. The hard copy package is immediately followed up by an electronic message, with CV, statement, and guidelines attached. Referees are given 6 weeks to respond. They are contacted periodically with polite but firm reminders. We seek but do not always achieve 100% response rate; reasons for failure to send letter are recorded, eg, the referee is traveling, is unfamiliar with the nominee's research, etc. It takes about 3 months to collect all responses, often longer. For joint/interdisciplinary appointments, the letters are sent by the home department. They may be co-signed by the secondary department chair(s). Collection of the letters is the responsibility of the home department.

8. The Epidemiology Committee on Appointments and Promotions conducts the review:
   A. A faculty member familiar with the nominee’s research summarizes her/his accomplishments to the committee
   B. CV, statement, teaching evaluations, 5 selected publications, and referee letters are reviewed
   C. An open vote is taken to determine whether the case should go forward to the MSPH School COAP.
The Department maintains a record of the vote. Note: only tenured members of the COAP are eligible to vote on appointments and promotions for unmodified (tenured or tenure-track) titles. A quorum consisting of four or more Epi COAP members will be required for consideration of all appointments and promotions. For appointments and promotions of unmodified (tenured or tenure-track) titles, a quorum consisting of four or more tenured Epi COAP members will be required. COAP members may vote by email, if necessary. For joint/interdisciplinary appointments, approval is also needed from the secondary department(s).

9. All COAP votes are advisory and recommendations to the Department Chair who ultimately decides on advancing faculty for promotion.

10. Upon approval of letters by both department COAPs, a dossier is compiled including
   A. Chair’s letter (from each department if joint/interdisciplinary) and summary of teaching evaluations
   B. CV
   C. List of referees and all submitted letters
   D. Five selected publications that best represent the work of the nominee
   E. Signed MOA if joint/interdisciplinary

11. The case proceeds to the MSPH COAP. If joint/interdisciplinary with a department in another School at Columbia, must also be approved by that School’s COAP.
   A. MSPH COAP meets semi-monthly between September and June. It may take two or more months to get on their agenda. The chair or a senior faculty member will present the nominee to the MSPH COAP, which will then discuss the nomination and vote confidentially.
   B. The majority of our joint/interdisciplinary appointments are with departments at P&S. The school level COAP for P&S is the Faculty of Medicine COAP. It meets weekly between September and June but has a crowded agenda and may take two months to schedule.
   C. The approval of school COAP(s) is the final step.
Procedures and timelines

Steps for Nomination to Tenure in Epidemiology

(Additional steps necessary for joint or interdisciplinary appointments are noted in italics)

1. Takes place on a strict timeline.
   Faculty members seeking tenure submit the following, and meet with the chair prior to December 31 of their 5th year.
   
   A. COAP format CV. See Appendix A for format guidelines.
   
   B. Copies of teaching evaluations
   
   C. 4 page personal statement that addresses the arc of the nominee's career and describes the nominee's current research and teaching and plans for future projects, including role in the Department
   
   D. Copies of 5 scholarly publications that best characterize their work

2. The chair convenes an ad hoc committee to consider the tenure nomination. [The ad hoc comprises a mix of standing Epidemiology COAP members and, depending on the candidate's area of research, other tenured faculty with specific expertise in that area. In addition to voting on whether to proceed with nomination to tenure, the ad hoc committee is charged with contributing to the selection of referees, the preparation of the Statement of the Nominee's Qualifications, and the presentation of the nominee to the Epidemiology COAP.] An open vote of the ad hoc committee is taken to determine whether to proceed with the nomination.

3. If joint/interdisciplinary, a memorandum of agreement (MOA) between the departments is drafted, reviewed by each department and by faculty affairs, then circulated for signatures.

4. Two lists are developed in consultation with the chair and ad hoc committee (and the other departments(s) if joint/interdisciplinary).
   
   A. Referees: 12–15 academics at or above the rank that is being sought. None can be affiliated with Columbia University. Referees should be drawn from multiple institutions in the US and internationally to demonstrate the nominee's standing in his/her field.
   
   B. Comparison scholars (3–4 can overlap w/referees)

5. Tenure referee letters are sent, accompanied by the nominee's CV and personal statement. The hard copy package is immediately followed up by an electronic message, with CV and statement attached. Referees are given 6 weeks to respond. They are contacted periodically with polite but firm reminders. We seek but do not always achieve 100% response rate; reasons for failure to send letter are recorded, eg, the referee is traveling, is unfamiliar with the nominee's research, etc. It takes about 3 months to collect all responses, often longer. (For joint/interdisciplinary appointments, the letters are sent by the home department. They should be co-signed by the secondary department chair(s). Collection of the letters is the responsibility of the home department.)

6. Three statements are prepared with support from the chair and the ad hoc committee (and the other department(s) if joint/interdisciplinary):
   
   A. Personal statement (refined from statement originally submitted to chair)
   
   B. Statement of the nominee's qualifications (most important) prepared by Department chair and ad hoc committee
   
   C. Department analysis and objectives prepared by Department chair and ad hoc committee

7. The Epi COAP is convened to vote as to whether the case should proceed to the MSPH COAP.
A. A faculty member familiar with the nominee’s research summarizes her/his accomplishments to the committee

B. CV, statement, teaching evaluations, 5 selected publications, referee letters, and the 3 statements described above are reviewed

C. An open vote is taken to determine whether the case should go forward to the MSPH School COAP and the Department maintains a record of the vote. Note: only tenured members of the COAP are eligible to vote on nominations to tenure. A quorum consisting of four or more tenured COAP members will be required. COAP members may vote by email, if necessary. Any votes of “no” must be followed up by a letter or email addressed to the Chair explaining the reason for that negative vote. For joint/interdisciplinary, the other department’s executive committee reviews.

8. After the Epi COAP has voted, a letter summarizing the candidate’s qualifications, with the CV and other relevant documents attached, will be sent to all tenured faculty members in Epidemiology who do not have the level of Dean will be asked to vote via email. Materials are made available to tenured faculty members ahead of time. The vote is open, and a record of votes is maintained by the Department. Any votes of “no” must be followed up by a letter or email addressed to the Chair explaining the reason for that negative vote.

9. All COAP votes are advisory and recommendations to the Department Chair who ultimately decides on advancing faculty for promotion.

10. Tenure dossier is prepared, including the elements in number 7 above plus:

A. Chair’s letter (from other department if joint/interdisciplinary) and summary of teaching evaluations

B. Signed MOA if joint/interdisciplinary

11. The case proceeds to MSPH COAP and then to CUMC COAP.

A. MSPH COAP meets monthly between September and June. It may take two or more months to get on their agenda. The chair or a senior faculty member will present the nominee to the MSPH COAP, which will then discuss the nomination and vote confidentially.

B. The CUMC COAP meets weekly between September and June but has a crowded agenda and may take two months to schedule.

12. Dossier is forwarded to provost’s office for review by the Tenure Review Advisory Committee (TRAC) by December 15.

13. TRAC conducts final review by May 30.

14. If tenure is approved, the effective date is July 1 of the current year.

15. If tenure is not approved, the faculty member must adopt a modified (at CUMC) title by June 30 of the following year.
### SAMPLE TENURE TIMELINE

(Elements in *italics* are for joint and interdisciplinary appointments)

<table>
<thead>
<tr>
<th>#</th>
<th>STEP</th>
<th>DATE</th>
<th>COMMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>COAP format CV and personal statement to chair(s) with request for meeting; meet with chair for approval</td>
<td>Before December 31 of 5th year</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Chair(s) agree to pursue tenure</td>
<td>February of 6th year</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>CV, first draft of personal statement, and teaching evaluations to departmental Epi ad hoc for vote whether to nominate and seek letters</td>
<td>March</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Other department approval to nominate/go out for letters if needed</td>
<td>April</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Assemble list of potential referees and peers for comparison</td>
<td>Each department must approve lists</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Draft, finalize and sign MOA</td>
<td>Can take a few months, depending on issues of salary, space, and departmental contributions; can happen concurrently with referee letter process</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Send out requests for letters</td>
<td>May/June</td>
<td>Chair(s) from each department should sign</td>
</tr>
<tr>
<td>8</td>
<td>Referee responses collected</td>
<td>August/September</td>
<td>Home department is responsible for collecting letters</td>
</tr>
<tr>
<td>9</td>
<td>Draft and edit tenure statements for dossier</td>
<td>Tenure statements should be drafted early in the process with chair(s) and departmental ad hoc members</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Epi COAP reviews and votes on dossier</td>
<td>September</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>All tenured faculty review and vote on dossier</td>
<td>September</td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Other department COAP/executive committee approval to proceed to school level COAP</td>
<td>September</td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Finalize full dossier</td>
<td>September</td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>MSPH COAP</td>
<td>October</td>
<td>Dossier can be amended/updated between MSPH and CUMC COAPS</td>
</tr>
<tr>
<td>15</td>
<td>CUMC COAP</td>
<td>November</td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Dossier to Provost’s Tenure Review Advisory Committee (TRAC)</td>
<td>December</td>
<td></td>
</tr>
<tr>
<td>17</td>
<td>University-wide tenure review</td>
<td>By May 15</td>
<td>Decision from TRAC must be complete by May 15; this is final step before ratification by trustees</td>
</tr>
</tbody>
</table>
**SAMPLE TENURE CLOCK MILESTONES**

<table>
<thead>
<tr>
<th>MILESTONE</th>
<th>BASIC</th>
<th>WITH ETD</th>
<th>WITH ETD AND CHILDCARE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Professorial title begins</td>
<td>2007</td>
<td>2007</td>
<td>2007</td>
</tr>
<tr>
<td>Fourth year review</td>
<td>2010/11</td>
<td>2010/11</td>
<td>2010/11</td>
</tr>
<tr>
<td>Childcare exemption</td>
<td>No</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>ETD</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Department tenure decision</td>
<td>early 2013</td>
<td>early 2014 (moved up 1 year)</td>
<td>early 2015 (moved up 2 years)</td>
</tr>
<tr>
<td>TRAC review complete</td>
<td>May 2014</td>
<td>May 2015</td>
<td>May 2016</td>
</tr>
<tr>
<td>“Up or modified” date</td>
<td>June 2015</td>
<td>June 2016</td>
<td>June 2017</td>
</tr>
</tbody>
</table>

**Stopping the clock: ETD**

The ETD (exemption from teaching duties) emerged within the “downtown” context where faculty teach full time; we are beneficiaries of this policy. Eligibility is based on exceptional teaching/service while on tenure track and formal approval from the Chair. Procedurally, the candidate meets with Chair to apply; candidate prepares formal letter; the Chair prepares letter of support. The Provost adjudicates request; approval is not guaranteed. The ETD is generally accompanied by some reduction in teaching or service. The candidate remains an active contributing member of the Department, in line with typical faculty teaching or service expectations.

**Stopping the clock: Childcare statute**

Eligibility to stop the tenure clock is based on the candidate being primary parent for a child under 1 year of age. Procedurally, it requires a formal letter and proof of the birth/option of a child. The childcare exemption is granted under University statute by the Provost. There is a limit of 2 such exemptions per faculty member. Limit of two per faculty member.
Assistant Professor and above

- CV in COAP format. See Appendix A for format guidelines
- Up to 4 page personal statement that addresses the arc of the nominee's career and describes the nominee's current research and teaching and plans for future projects, including role in the Department. See Appendix B for more details.
- If joint or interdisciplinary, a memorandum of agreement between departments/centers.

Additional elements for Associate Professor and above

- List of 12 – 15 referees. Referees should be academics at the level of the appointment being sought or higher. There should be representation from a variety of U.S. institutions and 2-4 international institutions. A maximum of 2 can have a Columbia affiliation.
- Teaching evaluations.
- PDFs of 5 selected publications that best represent the candidate’s research career.

Further additional elements for tenure application

Lists

- 15-17 referees. None can have a Columbia affiliation.
- 4-5 comparison scholars. These can/should overlap with referees.

Statements

- Statement of the Nominee: This 4 page statement supplants the brief personal statement described above.
- Department Analysis and Objectives: This document discusses the current state of the nominating department and its future direction, and describes the needs the proposed appointment is expected to fill. It is not used to discuss the nominee's qualifications but rather to establish the importance of the appointment in the plans of the department.
- Statement of the Nominee's Qualifications: This 6 page document evaluates the nominee's scholarly achievements and potential for future growth, describes his or her teaching abilities, and compares the candidate with the leading scholars in the field. It also discusses how the nominee’s qualifications as a scholar and teacher will further the objectives of the departments or schools described in the Analysis above.
Appendices

MSPH COAP CV format
Guidelines for writing the personal statement

Appendix A
Appendix B
**PLEASE NOTE:**

- Sections 1 – 5 + 12 are mandatory. Other sections and subsections can be edited to describe accomplishments appropriately and clearly.
- For the sections of Work Experience (3), Education (4), Training (5) and Gaps (6), you are required to use the following format as proposed by the National Committee for Quality Assurance.
  - Beginning month & year for your current CUMC position, or, if new faculty, the month & year when you will begin your position.
  - Beginning & ending month & year for each previous position (work, training, education).
- List entries in reverse chronological order (most recent first) in all sections.
- Include a header containing your name and the page number.
- Only include an item once in the CV, even if it may apply to more than one section.
- Local refers to home institution; regional refers to city, state, and nearby states.
- Include concise, bulleted annotations to help communicate the significance of selected key accomplishments.
- Define abbreviations when first used within each section.
- Carefully proof for typos and format inconsistencies.

1. **Date of preparation of CV**

2. **Personal data**

   Name (include any other names you may have used)
   Birth date
   Birthplace
   Citizenship
   Do not include SSN, gender, race, religion, political affiliation, marital/parental status, or disability status

3. **Academic Appointments/Work Experience**

   Include beginning month & year for current (if new faculty, expected start date) for your MSPH position
   Include month & year of hire and end for each previous position
   Include official title and university/institution for each position including your current position
   List academic and hospital appointments separately
   Military service (as applicable) should be included under this section

4. **Education**

   Include month & year for degree program start date and degree awarded date
   Include degree and degree institution
   If Ph.D., or equivalent degree, include thesis title, sponsor and citation

5. **Training (if applicable)**

   Include month & year of training start and finish
   Include training position, discipline/specialty, and institution for residencies, fellowships and postdoctoral appointments

6. **Explanation of any gaps in work/training/education**

   Any gaps in work/education history that are greater than six months must be documented
7. Licensure and Board Certification (as applicable)

List separately by category.
Include both active licenses and inactive licenses.
Include the state and year of licensure.
Do not list DEA numbers.
Categories:
- Licensure
- Board qualification

8. Honors and Awards

Include professional awards, election to selected professional societies, important invited lectureships, and special appointments.
Include year received and name of awarding institution.
Annotate, as needed (e.g., description, selection process, number of recipients per year)

9. Academic Service

Include involvement on local, regional or national/international committees or service activities.
Include month(s) & year(s), your role, type of activity, name of committee, and name of institution or organization.

10. Professional Organizations and Societies

List separately by category and by local, regional, national and international levels:
- Memberships and Positions
- Consultative
- Journal Reviewer
- Editorial Board

11. Fellowship and Grant Support

List separately by category.
Include dates, grant title, granting agency, grant number, direct support funds, and your role.
Include the PI if other than yourself.
Categories:
- Past Support
- Present Support
- Pending Support

12. Educational Contributions

List separately by category and for local, regional, national and international.
Include data such as learner evaluations communicating the quality of educational contributions, if possible.
Categories:
- Direct Teaching/Precepting/Supervising
  Include year(s), type and scope (i.e., contact hours) of teaching, type and number of learners, and your role. (Examples include lecturing, facilitating small groups, ward attending, and bedside teaching).
- Advising and Mentorship
  Include year(s), nature of advising/mentoring, name of mentee, current status of mentee, and mentee accomplishments, when possible. (Examples include graduate student, postdoctoral researcher, medical student, resident, fellow, etc.)
- Educational Administration and Leadership
  Include year(s), scope (i.e., contact hours), leadership role, and nature of the program. (Examples include directing or teaching a course, clerkship, training program, or chairing curriculum task force.)
- Instructional/Educational Materials used in Print or other Media
  Include year(s), scope (i.e., contact hours), type of product/innovation, type of learner, your contribution, intended audience, and how the material is used. If published in print or web, include citation. (Examples include curricula, syllabi, tutorial classes, teaching exhibits, simulation programs, web-or CD-based educational material, training videos/DVDs.)
- Community Education
  Include year(s), nature of the activity, scope (i.e., contact hours), type and number of learners, and your role. (Examples include community health lecturer, organizer of/participant in health outreach events.)

List separately by category and for local, regional, national and international.

- **Practice or Public Health Activities**
  Include year(s) of practice, name and location of practice, type of activity, level of activity (e.g., sessions, days or hours per week or month). (Examples include inpatient or ICU attending, special procedures, ambulatory practice, public health program design, implementation and evaluation.)

- **Clinical or Public Health Innovations**
  Include time of innovation launch, title/location of innovation, your role, short description of the influence of the innovation on clinical care or practice management. (Examples include novel approaches to diagnosis, treatment or prevention of disease, development and application of technology to clinical and population health care and development of models of care delivery.)

- **Clinical or Public Health Administration and Leadership**
  Include year(s), leadership role, and description of activity/program. (Examples include in patient safety initiatives, clinical programs, clinical supervision and practice, procedural innovations, developing clinical care protocols/pathways.)

- **Additional Clinical or Public Health Service Activities**
  Include year(s), role, and description of activity/program. (Examples include public health or community medical service, medical care delivered at international sites, telemedicine, medical journalism, innovative partnerships.)

14. Patents & Inventions

List separately by category:

- Patents
  Include all inventors, title of invention, patent number.

- Patent Applications
  Include all authors, title of invention, patent application number.

15. Publications

Number publications, in reverse chronological order, by category.
Include all authors in the sequence in which they appear on the publication; complete title of publication; name of journal; year of publication; volume number; and inclusive pagination (e.g., 444-459). (Reordering of authors, omission of names, or the use of "et al" is not permitted.)
Include only material that is published or accepted for publication. Do not include manuscripts that have been submitted or in preparation. For publications in a book or symposium issue of a journal: List authors in the sequence in which they appear in the publication; complete title, as published; editors; name of book; publisher; city; year; inclusive pagination.
Bold your name wherever it appears in the author list. Indicate with an asterisk (*) all publications for which you are a senior author. Indicate if you are a co-first-authors with an annotation.

Categories:

- **Peer-Reviewed Research Publications in Print or other Media**
- **Other Peer Reviewed Publications in Print or other Media**

Describe the type of material, provide citation (if applicable) and clarify how the material is used locally, regionally, nationally or internationally. Describe your contribution. (Examples include clinical guidelines and reports.)

- Reviews, Chapters, Monographs, Editorials
- Books/Textbooks for Medical or Scientific Community

Indicate if you were author or editor.

- Meetings/Invited oral and poster presentations
- Case Reports
- Letters to the Editor
- Other Media
- Thesis
- Other Non-Peer Reviewed Publications in Print or Other Media
  (Examples include proceedings of professional meetings, published abstracts or poster presentations.)
- Non-authored Publications
  (Examples include publications in which faculty members are formally acknowledged for her/his contributions.)
16. Invited and/or Peer-Selected Presentations at Regional, National or International Levels

Number presentations, in reverse chronological order, by regional, national, and international level, and by category, as applicable:
Include for each presentation your name, role, title of presentation, name of organizing institution, year.
(Example categories include grand rounds, hospital lectures, seminars, presentations at professional meetings, being panelist or moderator.)
Sample SPIRE annotated bibliography

SPIRE=Supporting & Promoting Interdisciplinary Research and Education

Your curriculum vitae (CV), will also include an “annotated publications list” in which you will provide additional information about your work. Annotations are required for all publications on which you appear as a “middle” author (i.e., neither first nor last author); you may also supply annotations for papers on which you are first or senior author if you so desire (but this is not required). If there is a tradition in your particular field or discipline to list authors alphabetically, please include this information in your annotated bibliography.

For each publication on which you are a middle author, please indicate the nature of your contributions to the manuscript, using descriptors that are similar to the following, modified as needed for consistency within the context of your own field:

I have made substantial contributions to this publication/work with respect to:

A. Conception and design of the analysis or study
B. Acquisition of data, identification of sources, or conduct of interviews
C. Analysis and interpretation of data/information
D. Drafting the manuscript and/or revising the manuscript for intellectual content
E. Mentorship of the lead author

In addition to describing your contributions to each paper, you may also choose to provide additional information regarding the journal selected. Here you may describe the reason for choosing the journal (e.g., invited paper, the journal's ability to reach specific populations, its reach with respect to practitioners, policymakers and/or stakeholders, etc.), its standing in the field, or its impact factor.

EXAMPLES:

Jacobson JS, Begg MD, Wang LW, Wang Q, Agarwal M, Norkus E, Singh VN, Young T-L, Yang D, Santella RM (2000). Effects of a 6-month vitamin intervention on DNA damage in heavy smokers. Cancer Epidemiology, Biomarkers & Prevention 9: 1303-1311. Note: I made substantial contributions to this paper with respect to conception and design of the study; analysis and interpretation of data; and drafting the manuscript. Cancer Epidemiology, Biomarkers & Prevention publishes original, peer-reviewed research on cancer causation, mechanisms of carcinogenesis, prevention, and survivorship. It accepts approximately 42% of manuscripts submitted and has an impact factor of 4.7.

Begg MD, Paykin AB (2001). Performance of and software for a modified Mantel-Haenszel statistic for correlated data. Journal of Statistical Computation and Simulation 70: 175-195. Matte TD, Bresnahan MA, Begg MD, Susser ES (2001). The influence of birth weight variation in the normal range and within sibships on IQ at age 7. British Medical Journal 323: 310-314. [PMCID: PMC37317] Note: I made substantial contributions to this paper with respect to conception and design of the study; analysis and interpretation of data; drafting the manuscript; and revising the manuscript for intellectual content.

Ahsan H, Hodge SE, Heiman GA, Begg MD, Susser ES (2002). Relative risk for genetic associations: The caseparent triad as a variant of epidemiologic cohort designs. International Journal of Epidemiology 31: 669-678. Note: I made substantial contributions to this paper with respect to conception and design of the study; analysis and interpretation of data; drafting the manuscript; and revising the manuscript for intellectual content.

Panageas KS, Begg MD, Grbic JT, Lamster IB (2003). Analysis of multiple 2x2 tables with site-specific periodontal data. Journal of Dental Research 82: 514-517. Note: I made substantial contributions to this paper with respect to conception and design of the study; drafting the manuscript; and mentorship of the lead author. This journal was chosen because of its wide reach to data analysts and researchers in oral health research, and for its relatively high impact factor (3.496) among journals in dentistry and oral health.

The personal statement is a narrative accompaniment to the COAP format CV, and provides reviewers with an expanded frame of reference to evaluate the candidate. In instances when the candidate is preparing for a tenure nomination, the personal statement will undergo substantial revision and expansion under the guidance of the candidate’s mentor, the Department Chair, and other senior faculty in the Department.

Candidates should provide summary information (both qualitative and quantitative) about each of the following:

1. **Research and scholarship.** This is a summary of your research interests, achievements, and direction. It is essential to highlight and fully draw out the uniqueness of the scholarly contributions in this section of the statement. This section should be presented in parts, described below.
   
   A. **Introduction:** Very briefly sum up your area of research.
   
   B. 2-4 specific primary research foci: Characterize your 2-4 primary research foci, citing key publications and addressing the significance of your findings. For each area of focus, characterize what we now know that we had not known previously as a result of your work, and how future research will build on your work.
   
   C. **Metrics:** Provide a brief summary of your scholarly publication record and grant activity, including your role as a Principal Investigator and funding amounts.

   Note: Candidates pursuing appointment or promotion in the applied public health or educational scholarship tracks should here summarize their peer-reviewed publications and/or equivalent track record in books, reports, and articles addressing public health practice/educational scholarship, as appropriate.

2. **Teaching and mentoring.** This should provide a summary of courses taught, a summary of teaching evaluations, and a summary of mentoring activities. Highlight any special recognition received for excellence in teaching or mentoring. Candidates seeking appointment or promotion in the educational scholarship and leadership track should expand this section to address educational achievements such as development of educational materials, curricular offerings and methods, and the extent to which these developments have affected local and national educational practice.

3. **Service and practice engagement.**
   
   A. **Citizenship:** Participation in and contribution to the intellectual life and educational mission of the Department, School, and University.
   
   B. **Practice:** Activities that directly affect the health of the public. Candidates seeking appointment or promotion in the applied public health track should expand this section to address accomplishments in this domain such as the development and/leadership in the application of guidelines, policies, or technology that change public health practice.

4. **Leadership in the field.** This section refers to your service and activities on scholarly journals, local, national, and international committees and panels, and in professional organizations. It should comment on leadership activities, including interdisciplinary activities, provide an accurate reflection of your stature in your field, locally, nationally, and internationally.

The statement should be up to four pages in length, single-spaced, in Calibri 11 point font. The statement should reflect in all four categories what your role in the Department will be. For promotions within the Department this typically emerges naturally in 1 – 4 above. For new appointments to Epidemiology, your anticipated contribution should be reflected in as many of the above categories as appropriate. You should attach a bibliography of cited papers. This will not be counted as one of the four pages of the statement.