

**REQUEST FOR DUAL CAREER FUNDING SUPPORT**

Date: \_\_\_\_\_

**I. Information About School Hiring Primary Recruit/ Retaining Existing Faculty Member**

Requested by: \_\_\_\_\_

(Name and School)

Phone Extension: \_\_\_\_\_

Email: \_\_\_\_\_

**II. Information About Primary Recruit/ Existing Faculty Member**

We are requesting university assistance for the partner of a(n):

\_\_\_ potential faculty recruit

\_\_\_ existing faculty member (please check one)

Name of the person we are attempting to recruit/retain: \_\_\_\_\_

Department: \_\_\_\_\_

Current or proposed title: \_\_\_\_\_

Anticipated appointment date of recruited faculty (if applicable): \_\_\_\_\_

**III. Information About Accompanying Spouse/ Partner**

We are requesting university assistance for a:

\_\_\_ potential staff recruit

\_\_\_ potential faculty recruit

Name of the accompanying partner: \_\_\_\_\_

Proposed department or office: \_\_\_\_\_

Proposed title: \_\_\_\_\_

If faculty, proposed rank and initial salary: \_\_\_\_\_

If staff, proposed salary class and grade: \_\_\_\_\_

Anticipated appointment or start date of recruitment: \_\_\_\_\_

**V. Other Information**

Please attach resumes/CVs of the faculty member being recruited/retained and the accompanying partner.

On a separate sheet, please provide a brief statement of the reason(s) for the request. In particular, please advise as to: qualifications and strengths of the primary faculty member and the accompanying spouse/partner, the needs of the department(s) hiring or retaining the primary faculty member, the needs of the department or office seeking to hire the accompanying spouse/partner, and, if appropriate, any other relevant considerations, such as how the arrangement will advance the mission of the University.

**V. Authorization of Deans**

Signature of Dean of School of Primary Recruit of Existing Faculty Member:

\_\_\_\_\_

Date: \_\_\_\_\_

Signature of Dean of Potential School of Accompanying Partner (If Applicable):

\_\_\_\_\_

Date: \_\_\_\_\_

Signature of Potential Supervisor of Accompanying Partner (If Applicable):

\_\_\_\_\_

Date: \_\_\_\_\_

Please submit the completed form and attachments via one of the following methods:

- E-mail to Lubna Mian at [mian@upenn.edu](mailto:mian@upenn.edu)
- Send intracampus mail to Provost's Office – Mail Code 6303
- Fax to (215) 898-6567

For more information, please call Lubna Mian (215) 898-1213

**VI. Provost's Office Internal Use**

**Signature of Vice Provost for Faculty Affairs:**

---

Approved

Disapproved

Date: \_\_\_\_\_

**Signature of Executive Director of Administrative Affairs:**

---

Approved

Disapproved

Date: \_\_\_\_\_

**Signature of Provost:**

---

Approved

Disapproved

Date: \_\_\_\_\_