



Request for Faculty Emeritus Status

Name <u>Tony McAdams</u>	Department Management	1	UID 000408014
I wish to retire from my position as	Professor of Manageme	nt	
at the University of Northern Iowa,	effective <u>June 30, 2016</u> .	8	
I have twenty (20) or more years of	f credible service in higher education.	(List institutions and dates	of employment)
University of Northern	Iowa	1982 to present	1902 to
Institution		Date	e
University of Kentucky		1974 to 1982	
Institution		Date	Э
Kent State University		1972 to 1974	
Tow M. Adu	sma		9
Signature of A	pplicant	Date	е
the University of Northern Iowa. (UDR. McADAMS HAS DERN S	statement verifying that ten (10) years se the back of this form if more space of THE FACULTY I	e is required.) BY GOOD STAUDING FOR	R OVER 30 YEAKS.
Approved and Accepted			
Man Connecte		11/11/15	
Departmen W.	t Head	u/11/15 Date	
Dean of College	e (if applicable)	Dat	е
University Faculty Senate Chair		Date	
Provost and Vice President		Date	
President		Date	

Please prepare this form: sign and submit to your department head. When the process for approval has been completed, the division head's office will make copies and distribute them to each of the above signatories and the Department of Human Resource Services.

Revised 11/2012