



108 Administration Building
1001 Campus Delivery
Fort Collins, Colorado 80523-1001
P: 970-491-6614

Faculty Application for Emerit Status

Section 1: Applicant Information

Name: _____

Current Title: _____

Department: _____

College: _____

CSU Start Date: _____

CSU Retirement Date (prior to any transitional appointment): _____

Transitional Appointment Dates (if applicable): _____

Total Years of Service to CSU: _____

Emerit Form to be Used:

- Emeritus
- Emerita
- Emerit (non-binary)

Title(s) Eligible for Emerit Status (highest faculty rank; include in your Section 2 attachment any administrative positions held for at least five years): _____

Section 2: Attachments

CV: Attach your current CV to this application.

Summary of Accomplishments and Contributions: We acknowledge and appreciate the extensive contributions faculty have made during their long careers at CSU. For this application and to meet Board of Governors requirements, attach a *brief summary* of accomplishments and contributions to CSU for submission to the Board of Governors. Average summaries are two paragraphs/250 words. Please submit no more than four paragraphs/400 words. The Office of the Provost and Executive Vice President may edit or alter this summary prior to submission to the BOG. *Please submit this as a Word document so the summary may be easily captured for reporting to the Board of Governors.*



Section 3: Signatures and Approvals

Applicant: Sign to indicate that the information in the application is true and correct, then submit with the attachments noted in Section 2 to the unit head.

Applicant Signature: _____ Date: _____

Unit Head: Verify information in application; if requirements are met and the request is approved, sign below.

- Approved
- Denied

Name: _____ Signature: _____ Date: _____

Dean: Verify information in application; if requirements are met and the request is approved, sign below.

- Approved
- Denied

Name: _____ Signature: _____ Date: _____

Provost/EVP: Acknowledge receipt of application and eligibility by signing below.

Name: _____ Signature: _____ Date: _____

Last update: July 2025