



PLEASE NOTE  
Part "A" - To be completed by  
nominating institution

2024

## PIPER PROFESSOR NOMINATION

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Name of College/University/Institute

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Address of Institution

Zip

Type of Institution: (As defined by Coordinating Board)

( ) Public Senior    ( ) Public Community/Jr.    ( ) Public Technical Inst.    ( ) Independent Senior    ( ) Independent Junior

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Name of Piper Professor Nominee

Highest Degree Held  
(Abbreviated Form)

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Rank/Title of Nominee and Department

Years of Teaching at College Level \_\_\_\_\_ Years of Teaching at Present Institution \_\_\_\_\_

Current Teaching Load: Lecture Hours/Week \_\_\_\_\_ Lab Hours \_\_\_\_\_ Other \_\_\_\_\_ \*

Approximate No. Students: Undergraduate \_\_\_\_\_ Graduate \_\_\_\_\_ Other \_\_\_\_\_ \*

Standard Full-Time Teaching Load at your Institution: Undergraduate \_\_\_\_\_ Graduate \_\_\_\_\_

Summer Teaching: \_\_\_\_\_

\* Other = Conference courses; Theses/Dissertations Directed; Misc. (Describe in next section)

Please describe current additional or administrative duties, i.e., Chairman of Department, Graduate Advisor, Thesis/Dissertation Director, etc., giving numbers of Professors/Students involved and approximate number of hours devoted thereto.

Student Organizations or Scholastic Fraternities Sponsored: (during past three years).

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Membership in Honor Societies; Professional Societies; Listing in Who's Who or Other;  
Special Educational Projects Undertaken (TV series, etc.), Special Awards/Grants Received:

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Service to off-campus community: (committee work, church work, fund drives, Scouts, etc.)

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Date	Signature of Administrator
	Print Name of Administrator
	Rank/Title/Administrative Position