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# AFFIRMATIVE ACTION SELECTION REPORT JUSTIFICATION FOR FINAL SELECTION

To be sent to the Office of Institutional Equity and Diversity

POSITION TITLE (Include Rank and Specialization) \_\_\_\_\_

POSITION NUMBER: \_\_\_\_\_ COLLEGE/DIVISION: \_\_\_\_\_

NO

FOR ASSISTANT CHIEF PRESIDENT OF INSTITUTIONAL EQUITY AND DIVERSITY

COMMENTS:

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INITIALS: \_\_\_\_\_

DATE: \_\_\_\_\_

