The ASWCC is responsible for selecting and appointing student representatives to Faculty Probationary Review committees (also known as Faculty Tenure Committees). Tenure is a faculty appointment for an indefinite period of time which may be revoked only for sufficient cause and by due process.” (RCW 28b.50.851). The student representative’s role in the process is to act as an equal member of the committee and fully participate in inclusive decision-making.

Applicants for this role of student representative is required to prepare for and attend all meetings (1-3 meetings per quarter to be scheduled by the committee chair). In addition to attending committee meetings, the student representative may be asked to conduct an observation of the probationer.

**Period of Appointment to a committee:** Ideally, a student representative will continue their work with their committee for the entire time they are enrolled at Whatcom Community College, or until the committee’s work is done. The Probationary Review period takes place over the course of 3 years. Once the student representative is placed on the committee, they will stay appointed to their committee until their quarter of graduation.

**Qualifications:**
- Enrolled in a minimum of 12 credits at WCC for the duration of their committee appointment
- Minimum cumulative 2.0 GPA (to be maintained for the duration of their committee appointment)

**Benefits:**
There are many benefits of serving on a tenure committee, including:
- the opportunity to shape campus culture and share student perspective
- gain understanding of the faculty experience
- work closely as colleagues with college staff
- enhance your resume and professional communication skill
- Create a network of professional references

Your application will be reviewed for completeness, neatness, thorough and thoughtful answers to questions, and fulfillment of job requirements listed above regarding plan to be enrolled, and GPA. Please print or type your responses.

Please direct questions and completed applications to the Coordinator for Student Life and Development:

**Lucas Nydam**
Coordinator for Student Life and Development
Syre Student Center 208
LNydam@whatcom.edu
360.383.3009

The Office of Student Life & Development respects individual differences and provides equal access and opportunity for all qualified candidates regardless of race, color, religion, sex, sexual orientation, gender identity, gender presentation, national origin, ancestry, age, disability, ethnicity, family status, immigration status, socioeconomic status, or veteran status.
# 2019-2020 ASWCC Representative for Tenure Committee Application

Completed applications include:
- □ Application
- □ Faculty/Staff Recommendation Form for ASWCC Representative (pg 3 of this packet)
- □ Copy of Degree Plan showing quarter of graduation (MyWCC/Starfish)
- □ Unofficial Transcript

## Applicant Information

<table>
<thead>
<tr>
<th>Name: ________________________________________</th>
<th>Student ID#: __________________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cell Phone: ___________________</td>
<td>Alternate Phone: __________________</td>
</tr>
<tr>
<td>WCC Email: (Print email clearly! This is how we will communicate with you throughout the process.)</td>
<td></td>
</tr>
<tr>
<td>Cumulative GPA: ______________</td>
<td>Expected Month/Year of WCC Graduation: ______________</td>
</tr>
</tbody>
</table>

What is your academic degree plan? __________________________________________ (please attach graduation plan)

## Short-Answer questions (Please print, or attach typed responses)

What interests you about serving on a Faculty Tenure Committee? What do you hope to gain from this experience?

__________________________________________

Briefly explain the importance of the role of the student representative on this committee:

__________________________________________

__________________________________________

__________________________________________

## Signature

I certify that all information provided on this application is accurate. By signing this application, I also give permission for Whatcom Community College to access my academic information to verify qualifications and to utilize any photographs, video, testimonials, and/or audio recordings of me in which I may be featured.

Applicant’s Signature ______________________ | Date ____________

If under 18, please have a parent or guardian print and sign in the area below:

Parent/Guardian Signature ______________________ | Date ____________

Parent/Guardian Print Name ______________________