

Appendix II.

CHECKLIST A CERTIFICATION CHECKLIST FOR REVIEW OF LIBRARIANS (Applicable to Candidate Currently a UC Employee) Revised 11/2014

NAME OF CANDIDATE _____ LIBRARY PROGRAM _____

Candidate checks the below-listed items to certify that these obligations have been fulfilled in the current academic review of the above-named Candidate.

Before the academic review file was assembled:

- ___ 1. The Candidate was notified of the impending action.
- ___ 2. The Candidate was informed about the entire review process and was made aware of APM 210-4 and 360, the Academic Review Procedure Manual (ARPM) and, as applicable, the Memorandum of Understanding: University of California and University Council-American Federal of Teachers.
- ___ 3. Candidate was given an opportunity to ask questions.
- ___ 4. Candidate was asked to provide the following information (check those items Candidate actually provided, all to be signed and dated, as appropriate, by Candidate and Program Director).
- ___ a. Candidate's Letter Request Form (required)
 - ___ b. Academic Performance Self-Review (required)
 - ___ c. Updated Position Description (required)
 - ___ d. Updated Biography for Academic Personnel Form (required)
 - ___ e. Other information that the Candidate wishes to have included in the review file (optional)

Before the program level recommendation was submitted to Library Human Resources:

- ___ 5. Candidate was provided the opportunity to inspect all documents to be included in the file other than confidential documents.
- ___ a. Review Initiator/Program Director's Evaluation (required)
 - ___ b. Updated Organization Chart (required)
 - ___ c. Secondary Evaluation(s) (required if applicable)
- ___ 6. Candidate was informed that they had the right to request a redacted copy of each solicited letter included in the file.
- ___ 7. Candidate was given the opportunity to submit written statement in response to or commenting upon material in "5." and/or "6." above.
- ___ Candidate's written statement, if any, must be included in file.
- ___ 8. Program-level evaluations were shown to and discussed with Candidate.
- ___ 9. Program Director's recommendation was shown to and discussed with Candidate.
- ___ 10. Secondary evaluation(s) were shown to and discussed with Candidate.
11. Candidate exercised the right to make a written statement on the Program Director's recommendation
___ Yes ___ No

CERTIFIED BY:

Signature of Candidate

Date

Signature of Program Director

Date