

# **Internal Guidelines** for faculty appointments and promotions



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# Preamble

# Preamble

The following are Mailman School of Public Health Department of Epidemiology guidelines for appointments and promotions. These guidelines provide general criteria for level of achievement expected before a faculty member will be considered for promotion or hire. The intent in presenting these guidelines is to help faculty in considering their own trajectory and achievements against a set of commonly understood expectations. For additional information, also refer to the Mailman School of Public Health (MSPH), Columbia University Irving Medical Center (CUIMC), and Columbia University guidelines for promotion of faculty.

In evaluating any candidate for potential promotion or hire, the department chair and relevant committees (the departmental faculty search committee [FSC], departmental committee on appointments and promotions [DCOAP], the MSPH COAP, the CUIMC COAP, and University Tenure Review Advisory Committee [TRAC]) will use their discretion, fully considering the candidate's track record and promise as a scholar. Achievement of the markers in this document does not guarantee that a faculty member will be proposed for promotion or hire, nor that promotion or hire will be granted by the relevant committees. Some faculty members may be viewed favorably for promotion if they do not meet the numerical or other criteria described below but achieve distinction in other ways. The DCOAP will consider the overall portfolio in evaluating a candidate's accomplishments. For example, it is possible that a candidate would be viewed very favorably for promotion with fewer publications than listed, but with a small number of groundbreaking publications or outstanding grant support or an exemplary record of non-traditional forms of academic contribution, especially real-world leadership, sustained advocacy, the creation or influence of high-impact policies that directly contribute to the health of communities outside the academy, or other research, teaching, and service focused on anti-racism, equity, and inclusion.

Although these guidelines are not meant to represent the official policies of the MSPH, the CUIMC, or Columbia University at large, they are intended to work in concert with these other official appointment and promotions policies. They were developed by Epidemiology Department leadership and the DCOAP to enhance transparency and consistency in the appointment and promotions process.

There are two major academic tracks, as follows: "unmodified tenured or tenure track" and "non-tenure track". Non-tenure track faculty are designated with the "at CUIMC" title.

Within each faculty rank, there are a total of four pathways:

1. Tenured/tenure track
2. Non-tenure track: Investigator focus
3. Non-tenure track: Applied public health focus
4. Non-tenure track: Educational scholarship and leadership focus

Each of these full-time faculty tracks is described in the sections that follow. Appointment and promotion guidelines for part-time faculty, including both those with clinically modified and adjunct titles, can be found in the subsequent section of this guide.

General guidelines for selecting, appointing, and hiring new faculty in Epidemiology are listed below. These are intended to apply to faculty recruits at any rank and serve only as guideposts, i.e. they are in no particular order, any one faculty candidate may satisfy some or all of the guidelines, and the department chair holds the final decision for all hires, appointments, and promotions within the department:

- Fit for existing or emerging departmental program or direction
- Scientific excellence, existing or potential
- Teaching fit and ability to meet priority needs, existing or potential
- Contribution to the department's diversity and anti-racist values and actions
- Grant funding, especially from extramural sources, existing or potential
- Interview performance, in terms of research and teaching potential
- Potential for collaboration with other faculty member(s)
- Joint sponsorship by other Columbia entity(ies)
- Outstanding recommendations from respected references
- Collegiality and eagerness to be a good citizen of the department

# Promotion of Diversity, Anti-racism, and Inclusion

The Department of Epidemiology is committed to working actively to eliminate all forms of racism, including structural and interpersonal racism within our own departmental community and beyond. We commit to becoming an anti-racist, multicultural organization in which racial, ethnic, gender, and cultural differences are recognized, respected, and celebrated in and of themselves, and as assets to our teaching, service, and science. To facilitate moving forward with these goals, the Epidemiology Departmental Committee on Appointments and Promotions (DCOAP) will prioritize promotion of diversity and anti-racism among our faculty in the following ways,

(1) Membership of Departmental Committee on Appointments and Promotions

The department chair, other departmental leadership, and the DCOAP will prioritize diversity of the membership of DCOAP, to promote and maintain representation of Black, Latinx, and/or indigenous individuals.

(2) Faculty recruitment and promotion

The department chair and DCOAP will prioritize diversity in decisions about faculty recruitment and promotion, to promote and maintain representation of Black, Latinx, and/or Indigenous individuals on our faculty at all levels.

(3) Research, teaching, and service to promote anti-racism, equity, and inclusion

In appointment, promotion, and tenure processes, the department chair and DCOAP will recognize and reward research, teaching, and service activities that promote anti-racism, equity, and inclusion. In doing so, equal consideration will be provided for non-traditional forms of academic contribution, especially real-world leadership, sustained advocacy, and the creation or influence of high-impact policies that directly contribute to the health of communities and community engagement outside the academy, and other research, teaching, and service (as distinct from teaching and research) focused on anti-racism, equity, and inclusion.

The DCOAP and departmental leadership will weave these priorities into all aspects of appointments and promotions, as represented in this document and beyond. As new anti-racist and diversity priorities emerge, they will be presented to DCOAP for review and added here.



# Operations of the Departmental Committee on Appointments and Promotions (DCOAP)

DCOAP OPERATIONS

The DCOAP includes 8-10 members, all of whom are associate or full professors, and one of whom serves as committee chair. The department chair serves ex-officio, without voting rights. Recommendations of DCOAP are advisory to the department chair, who is ultimately responsible for final decisions regarding appointments and promotions. Administrative support is provided to the DCOAP by a team of in-house faculty affairs and human resources professionals, including a senior faculty affairs/human resources administrator who attends all DCOAP meetings. The committee meets once per month as needed from September through June, to review candidates for appointment or promotion. Ad hoc meetings may also be scheduled for the summer months as needed, conditional on committee members' availability.

The full dossier of each candidate to be considered is distributed to committee members before the meeting. Meetings are led by the committee chair and consist of a presentation of each candidate by one committee member, followed by discussion and an open vote. Only tenured members of DCOAP are eligible to vote on appointments and promotions to unmodified (tenured or tenure-track) titles. In addition, only members of DCOAP who are full professors are eligible to vote on nominations to full professor titles. Separate meetings are held to accommodate these requirements as needed. For each nomination, a quorum consisting of at least four DCOAP members who are eligible to vote is required. Occasionally (e.g., when there is time pressure, or when a quorum cannot be achieved otherwise due to scheduling conflicts), voting may be carried out asynchronously, by electronic means such as email.

For tenure candidate decisions approved by DCOAP, a follow-up vote via electronic means is then taken of all tenured faculty members of the Department of Epidemiology who do not have the level of dean or provost, and who have not already voted as part of the DCOAP. For decisions on select part-time epidemiology appointments and promotions, DCOAP voting is carried out asynchronously, by electronic means such as email (see Criteria: PartTime Faculty at All Ranks).

See Procedures and Timelines section for further details.



# Criteria: Assistant Professor

# Assistant Professor

## TENURE TRACK

Demonstration of promise for distinction in research/scholarship and teaching/mentoring, service, and leadership in the field.

### I. Research and scholarship

Publications: Several peer-reviewed publications, at least one as first author.

Grants: Potential ability and intent to obtain significant peer-reviewed grant support as a lead Principal Investigator (PI).

### II. Teaching and mentoring

Teaching: Demonstrated excellence in teaching and planned role for leading their own course.

Mentoring: N/A

### III. Service and practice engagement

Citizenship: A plan for engagement in the life of the Department, i.e., participation in activities considered essential to the teaching, research, or programmatic goals of the Department.

[AS APPLICABLE] Practice: Engagement in national public health service, i.e., activities that directly affect the health of the public.

### IV. Leadership in the field

Outstanding recommendations from prior mentors.

## NON-TENURE TRACK

Investigator focus

Demonstration of promise for achievement in research/scholarship.

### I. Research and scholarship

Publications: Several peer-reviewed publications, at least one as first author.

Grants: Potential ability and intent to obtain significant peer-reviewed grant support as a PI and/or as a Co-investigator.

### II. Teaching and mentoring

Teaching: Demonstrated excellence in teaching and planned role for teaching own course, or assisting in a course.

Mentoring: N/A

### III. Service and practice engagement

Citizenship: A plan for engagement in the life of the Department, i.e., participation in activities considered essential to the teaching, research, or programmatic goals of the Department.

[AS APPLICABLE] Practice: Engagement in national public health service, i.e., activities that directly affect the health of the public.

### IV. Leadership in the field

Very strong recommendations from prior mentors.

# Criteria: Assistant Professor

## Assistant Professor

### NON-TENURE TRACK

Applied public health focus

Demonstration of promise of achievement in public health service/practice.

#### I. Research and scholarship

**Publications:** Several peer-reviewed publications or equivalent track record of publication in books and reports.

**Grants:** Potential ability and intent to obtain, or play a significant role in obtaining, peer-reviewed grant support is highly desirable.

#### II. Teaching and mentoring

**Teaching:** Demonstrated competence in teaching and planned role for co-teaching or lecturing in a course or workshop.

**Mentoring:** N/A

#### III. Service and practice engagement

**Citizenship:** A plan for engagement in the life of the Department, i.e., for participation in activities considered essential to the teaching, research, or programmatic goals of the Department.

**Practice:** Engagement in national public health service, i.e., activities that directly affect the health of the public. Participation in, or potential for participation in, guideline/quality assurance or public health intervention or outreach panels and writing groups.

#### IV. Leadership in the field

Very strong recommendations from prior mentors. Developing recognition for expertise in applied public health.

### NON-TENURE TRACK

Educational scholarship and leadership focus

Demonstration of promise of achievement in teaching/mentoring.

#### I. Research and scholarship

**Publications:** Several peer-reviewed publications or equivalent track record of publication in the area of educational scholarship and leadership.

**Grants:** Potential ability and intent to obtain peer-reviewed grant support is highly desirable.

#### II. Teaching and mentoring

**Teaching:** Development or clear potential for development of teaching materials, including new curriculum offerings, educational programs, textbooks chapters, syllabi, computer programs, or videotapes that improve the method or quality of instruction in didactic or small group settings. Demonstrated excellence and/or promise of excellence in teaching and planned role for teaching own course. Evidence of skills and potential for leadership in the educational arena.

**Mentoring:** N/A

#### III. Service and practice engagement

**Citizenship:** A plan for engagement in the life of the Department, i.e., for participation in activities considered essential to the teaching, research, or programmatic goals of the Department.

[AS APPLICABLE] **Practice:** Engagement in national public health service, i.e., activities that directly affect the health of the public.

#### IV. Leadership in the field

Very strong recommendations from prior mentors.

# Criteria: Associate Professor

## Associate Professor

### TENURE TRACK

Demonstration of distinction in research/scholarship, teaching/mentoring, citizenship, and leadership in the field.

#### I. Research and scholarship

Evidence of significant creativity, originality, innovation, and impact on the field of epidemiology or a related research field, standard of care, or health policy.

Publications: Minimum of 35 peer-reviewed publications, 10 as first or senior author. Where relevant, corresponding author may be equivalent to senior author. At least 3 of the first authored publications should be in major general or specialty journals. Substantial impact of research and scholarship based on evidence that the work is (1) being well cited (e.g., based on h-index, papers published in high-impact journals, papers with very high citation numbers, etc.) and/or (2) used to inform policy, practice, interventions, or public health tools, including outside the academy.

Grants: Consistent and sustained peer-reviewed funding support for research, with a clear trajectory for long-term growth. Leadership as PI/MPI of a minimum of one R01 or other grant comparable in distinction, and in almost all cases, of two or more R01 or comparable grants, or of one R01 or comparable grant plus a competing renewal.

#### II. Teaching and mentoring

Teaching: Has own course or major role in a major course. Student evaluations demonstrating highly effective teaching and well developed courses.

Mentoring: Clear record of successful mentoring of master's and pre- and postdoctoral trainees.

#### III. Service and practice engagement

Citizenship: Contributes to the life of the Department. Participation in activities considered essential to the teaching, research, or programmatic goals of the Department. Academic citizenship demonstrated by service on departmental, University, local, and national organization committees and/or leadership in University/national professional organizations. Community education is also considered.

[AS APPLICABLE] Practice: Clear evidence of national public health service, i.e., activities that directly affect the health of the public.

#### IV. Leadership in the field

Evidence of service on national committees, policy-making bodies, major organizations, editorial boards, study sections and the like. Honors and leadership in regional or national professional societies. Invited lectureships relating to the discipline on a national or international level. Letters of support from well-recognized individuals at peer institutions should consistently demonstrate an outstanding national reputation of leadership in a specific field.

### NON-TENURE TRACK

#### Investigator focus

Demonstration of substantial achievement in research/scholarship.

#### I. Research and scholarship

Publications: Minimum of 30 peer-reviewed publications, some in major general or specialty journals. Impact of research and scholarship based on evidence that the work is (1) being cited (e.g., based on h-index, papers published in high-impact journals, papers with high citation numbers, etc.) and/or (2) used to inform policy, practice, interventions, or public health tools, including outside the academy.

Grants: PI/MPI of at least one R01 or equivalent grant, or demonstrated significant role in multiple extramurally funded projects.

#### II. Teaching and mentoring

Teaching: Has own course or major role in a major course. Student evaluations demonstrating effective teaching and well-developed courses.

Mentoring: Clear record of successful mentoring of master's and pre- and postdoctoral trainees.

#### III. Service and practice engagement

Citizenship: Contributes to the life of the Department. Participation in activities considered essential to the teaching, research, or programmatic goals of the Department. Academic citizenship demonstrated by service on Department, University, local, and national organization committees and/or leadership in University/national professional organizations. Community education is also considered in this category.

[AS APPLICABLE] Practice: Clear evidence of national public health service, i.e., activities that directly affect the health of the public.

#### IV. Leadership in the field

Evidence of service on national committees, policy-making bodies, major organizations, editorial boards, study sections and the like. Honors and leadership in regional or national professional societies. Invited lectureships relating to the discipline on a national or international level. Letters of support from well-recognized individuals at peer institutions should consistently demonstrate a national reputation of leadership in a specific field.



# Criteria: Associate Professor

## Associate Professor

### NON-TENURE TRACK

Applied public health focus

Demonstration of substantial achievement in service/practice.

#### I. Research and scholarship

**Publications:** At least 25 peer-reviewed publications, some in major general or specialty journals, or substantial publication record in influential books and reports. Impact of research and scholarship based on evidence that the work is (1) being cited (e.g., based on h-index, papers published in high-impact journals, papers with high citation numbers, etc.) and/or (2) used to inform policy, practice, interventions, or public health tools, including outside the academy.

**Grants:** Substantial role(s) on own and/or other faculty's grants highly desirable.

#### II. Teaching and mentoring

**Teaching:** Makes a substantial contribution to teaching through own course or assisting in a major course. Student evaluations demonstrating effective teaching and well-developed courses.

**Mentoring:** Clear record of successful mentoring of master's and pre- and postdoctoral trainees.

#### III. Service and practice engagement

**Citizenship:** Contributes to the life of the Department. Participation in activities considered essential to the teaching, research, or programmatic goals of the Department. Academic citizenship demonstrated by service on Department, University, local, and national organization committees and/or leadership in University/national professional organizations. Community education is also considered in this category.

**Practice:** Clear evidence of distinguished national public health service, i.e., activities that directly affect the health of the public.

#### IV. Leadership in the field

Development of guidelines for public health protocols that are used locally, regionally, or nationally. Development of or leading the application of clinical or public health technology that changes practice. Honors and leadership in regional or national professional societies, committees, policy-making bodies, major organizations, editorial boards, study sections and the like. Substantial contributions to institutional, local, regional, national or international programs. Letters of support from well-recognized individuals at peer institutions should consistently demonstrate a national reputation of leadership in applied public health.

### NON-TENURE TRACK

Educational scholarship and leadership focus

Demonstration of substantial achievement in teaching/mentoring.

#### I. Research and scholarship

**Publications:** At least 25 peer-reviewed publications, some in major general or specialty journals, or substantial track record of publication in the area of educational scholarship and leadership. Impact of research and scholarship based on evidence that the work is (1) being cited (e.g., based on h-index, papers published in high-impact journals, papers with high citation numbers, etc.) and/or (2) used to inform policy, practice, interventions, or public health tools, including outside the academy.

**Grants:** Substantial role(s) on own and/or other faculty's grants highly desirable.

#### II. Teaching and mentoring

**Teaching:** Development of educational materials, including new curricular offerings, educational programs, textbook chapters, syllabi, computer programs, videotapes or simulation technology that make a unique contribution and represent significant improvement in the quality and methods of education. Must be director of at least one course. Student and peer evaluations demonstrating teaching excellence and well-developed courses over a sustained period of time. Demonstrated skills and leadership in the educational arena.

**Mentoring:** Clear record of successful mentoring of master's and pre- and postdoctoral trainees.

#### III. Service and practice engagement

**Citizenship:** Contributes to the life of the Department. Participation in activities considered essential to the teaching, research, or programmatic goals of the Department. Academic citizenship demonstrated by service on Department, University, local, and national organization committees and/or leadership in University/national professional organizations. Community education is also considered in this category.

[AS APPLICABLE] **Practice:** Clear evidence of national public health service, i.e., activities that directly affect the health of the public.

#### IV. Leadership in the field

Evidence of concentration in educational leadership/scholarship as demonstrated by regional or national recognition of educational expertise, invited lectureships, publications related to education, and membership on education-focused editorial boards. Letters of support from well-recognized individuals at peer institutions should consistently demonstrate a national reputation of leadership in the educational arena.

# Criteria: Full Professor

## TENURE TRACK

Demonstration of distinction in research/scholarship, teaching/mentoring, citizenship, and leadership in the field.

### I. Research and scholarship

Evidence of sustained, significant creativity, originality, innovation, and impact on the field of epidemiology or a related research field, standard of care, or health policy.

Publications: Minimum of 70 peer-reviewed publications, 30 as first or senior author. Where relevant, corresponding author may be equivalent to senior author. At least 10 of the first or senior authored publications should be in major general or specialty journals. Sustained productivity and substantial impact of research and scholarship based on evidence the work is (1) widely cited (e.g., based on h-index, several papers published in high-impact journals, several papers with very high citation numbers, etc.) and/or (2) used to inform policy, practice, interventions, or public health tools, including outside the academy.

Grants: Consistent and sustained peer-reviewed funding support for research, and in almost all cases with leadership as PI/MPI of a minimum of two current R01s or other grants comparable in distinction. PI/MPI leadership of other major funding sources are also quite helpful, such as program projects or center grants.

### II. Teaching and mentoring

Teaching: Has own course or major role in a major course. Sustained record of student evaluations demonstrating highly effective teaching and well-developed courses.

Mentoring: Clear record of successful mentoring of master's and pre- and postdoctoral trainees as well as successful mentoring of junior faculty.

### III. Service and practice engagement

Citizenship: Contributes to the life of the Department. Participation in activities considered essential to the teaching, research, or programmatic goals of the Department. Academic citizenship demonstrated by service on Department, University, local, and national organization committees and/or leadership in University/national professional organizations. Community education is also considered in this category.

[AS APPLICABLE] Practice: Clear evidence of national and international public health service, i.e., activities that directly affect the health of the public.

### IV. Leadership in the field

Evidence of service on national committees, policy-making bodies, major organizations, editorial boards, study sections and the like. Honors and leadership in regional or national professional societies. Invited lectureships relating to the discipline on a national or international level. Letters of support from well-recognized individuals at peer institutions should consistently demonstrate an outstanding national and international reputation of leadership in a specific field.

## NON-TENURE TRACK

### Investigator focus

Demonstration of substantial achievement in research/scholarship.

### I. Research and scholarship

Evidence of sustained, significant creativity, originality, innovation, and impact on the field of epidemiology or a related research field, standard of care, or health policy.

Publications: Minimum of 60 peer-reviewed publications, some in major general or specialty journals. Sustained productivity and substantial impact of research and scholarship based on evidence the work is (1) widely cited (e.g., based on h-index, several papers published in high-impact journals, several papers with very high citation numbers, etc.) and/or (2) used to inform policy, practice, interventions, or public health tools, including outside the academy.

Grants: PI/MPI of at least one R01 or equivalent or demonstrated significant role in multiple extramurally funded projects.

### II. Teaching and mentoring

Teaching: Has own course or major role in a major course. Sustained record of student evaluations demonstrating highly effective teaching and well developed courses.

Mentoring: Clear and sustained record of successful mentoring of master's and pre- and postdoctoral trainees as well as successful mentoring of junior faculty.

### III. Service and practice engagement

Citizenship: Contributes to the life of the Department. Participation in activities considered essential to the teaching, research, or programmatic goals of the Department. Academic citizenship demonstrated by service on Department, University, local, and national organization committees and/or leadership in University/national professional organizations. Community education is also considered in this category.

[AS APPLICABLE] Practice: Clear evidence of distinguished national and international public health service, i.e., activities that directly affect the health of the public.

### IV. Leadership in the field

Evidence of service on national committees, policy-making bodies, major organizations, editorial boards, study sections and the like. Honors and leadership in regional or national professional societies. Invited lectureships relating to the discipline on a national or international level. Letters of support from well-recognized individuals at peer institutions should consistently demonstrate a strong national reputation of leadership in the relevant areas.

# Criteria: Full Professor

## Full Professor

### NON-TENURE TRACK

#### Applied public health focus

Demonstration of substantial achievement in service/practice.

#### I. Research and scholarship

**Publications:** Minimum of 40 peer-reviewed publications, some in major general or specialty journals, or an equivalent publication record in influential books and reports. Sustained productivity in scholarly publications and substantial impact of research and scholarship based on evidence that the work is (1) being cited (e.g., based on h-index, papers published in high-impact journals, papers with high citation numbers, etc.) and/or (2) used to inform policy, practice, interventions, or public health tools, including outside the academy.

**Grants:** Substantial role(s) on own and/or other faculty's grants highly desirable.

#### II. Teaching and mentoring

**Teaching:** Must have own course or major role in a major course. Student evaluations demonstrating effective teaching and well-developed courses.

**Mentoring:** Clear record of successful mentoring of master's and pre- and postdoctoral trainees as well as successful mentoring of junior faculty.

#### III. Service and practice engagement

**Citizenship:** Contributes to the life of the Department. Participation in activities considered essential to the teaching, research, or programmatic goals of the Department. Academic citizenship demonstrated by service on Department, University, local, and national organization committees and/or leadership in University/national professional organizations. Community education is also considered in this category.

**Practice:** Clear evidence of distinguished national and international public health service, i.e., activities that directly affect the health of the public.

#### IV. Leadership in the field

Development of guidelines for public health protocols that are used locally, regionally, or nationally. Development of or leading the application of clinical or public health technology that changes practice. Honors and leadership in regional or national professional societies, committees, policy-making bodies, major organizations, editorial boards, study sections and the like. Substantial contributions to institutional, local, regional, national or international programs. Letters of support from well-recognized individuals at peer institutions should consistently demonstrate a strong national reputation of leadership in applied public health.

### NON-TENURE TRACK

#### Educational scholarship and leadership focus

Demonstration of substantial achievement in teaching/mentoring.

#### I. Research and scholarship

**Publications:** Minimum of 40 peer-reviewed publications, some in major general or specialty journals, or an equivalent publication record in influential books and reports. Sustained productivity in scholarly publications and substantial impact of research and scholarship based on evidence that the work is (1) being cited (e.g., based on h-index, papers published in high-impact journals, papers with high citation numbers, etc.) and/or (2) used to inform policy, practice, interventions, or public health tools, including outside the academy.

**Grants:** Sustained record of substantial role(s) on own and/or other faculty's grants highly desirable.

#### II. Teaching and mentoring

**Teaching:** Development of educational materials, including new curricular offerings, educational programs, textbook chapters, syllabi, computer programs, videotapes or simulation technology that make a unique contribution and represent significant improvement in the quality and methods of education. Must be director of at least one course. Student and peer evaluations demonstrating teaching excellence and well-developed courses over a sustained time period. Demonstrated skills and sustained leadership in the educational arena.

**Mentoring:** Clear record of successful mentoring of master's and pre- and postdoctoral trainees as well as successful mentoring of junior faculty.

#### III. Service and practice engagement

**Citizenship:** Contributes to the life of the Department. Participation in activities considered essential to the teaching, research, or programmatic goals of the Department. Academic citizenship demonstrated by service on Department, University, local, and national organization committees and/or leadership in University/national professional organizations. Community education is also considered in this category.

[AS APPLICABLE] **Practice:** Clear evidence of national and international public health service, i.e., activities that directly affect the health of the public.

#### IV. Leadership in the field

Development of innovative educational methodologies or materials that have influence and impact regionally, nationally or internationally. Evidence of educational leadership/scholarship as demonstrated by regional or national recognition of educational expertise, invited lectureships, publications related to education, and membership on education-focused editorial boards. Letters of support from well-recognized individuals at peer institutions should consistently demonstrate a strong national reputation of leadership in the educational arena.

# Criteria: Part Time Faculty

# Part Time Faculty

## GENERAL GUIDELINES

### Part Time Faculty at All Ranks

Some of our part-time faculty are designated with clinically modified titles, e.g., “Professor of Clinical Epidemiology” (clinical suffix) or “Clinical Professor of Epidemiology” (clinical prefix). Other part-time faculty are designated with formal adjunct titles at all ranks, e.g., “Adjunct Assistant Professor of Epidemiology,” “Adjunct Associate Professor of Epidemiology,” or “Adjunct Professor of Epidemiology.” And still other part-time faculty are designated as “Special Lecturer,” “Senior Lecturer,” “Lecturer,” “Associate,” or some combination thereof.

In considering promotions for part-time epidemiology faculty with clinically modified titles, the DCOAP will be provided with a full dossier to review, discuss, and vote on, broadly referencing the established guidelines for non-tenure track full-time faculty, at all ranks. In considering all other part-time epidemiology faculty appointments and promotions, the DCOAP will be provided with a CV to review and vote on asynchronously by electronic means, such as email. Suitability of these other part-time epidemiology faculty appointments and promotions will be evaluated based on the candidate’s past accomplishments and future ability to contribute activities or resources of clear substance to the department’s teaching, service, or scientific missions. Contributions of substance may include activities such as teaching or mentoring, the production of grant resources or collaboration, networking or reputational benefit to the department through a connection to another key institution, or a candidate’s past and presumed future high-impact accomplishments in epidemiology, public health, or related fields.

# Procedures and timelines

# Steps

## STEPS FOR APPOINTMENT TO ASSISTANT PROFESSOR

(Additional steps necessary for joint or interdisciplinary appointments are noted in *italics*)

1. Generally takes 3 - 4 months
2. Nomination for appointment:
  - A. Requires initial approval of Chair. Candidates should submit the following and meet with Chair:
    - i. CUIMC format CV. Obtain the most recent guidelines from the Department of Epidemiology Director of Human Resources/Faculty Affairs.
    - ii. Up to 4 page personal statement that addresses the arc of the nominee's career and describes the nominee's current research and teaching and plans for future projects, including role in the Department. See Appendix for more detail.
  - B. All new appointments require that the candidate give a special lecture in the department.
  - C. *If joint or interdisciplinary, the home department chair writes to the secondary department chair(s) in support of appointment. If secondary chair concurs, s/he indicates this in a return letter to primary chair.*
3. The Epidemiology Committee on Appointments and Promotions conducts the review:
  - A. A faculty member familiar with the nominee's research summarizes her/his accomplishments to the committee.
  - B. CV, statement, and teaching evaluations (if applicable) are reviewed.
  - C. An open vote is taken. Note: for nominations to Assistant Professor on the tenure-track, only tenured members of the COAP are eligible to vote. A quorum consisting of four or more Epi COAP members will be required for consideration of all appointments. For appointments to tenure-track titles, a quorum consisting of four or more tenured Epi COAP members will be required. COAP members may vote by email, if necessary.
4. All COAP votes are advisory and recommendations to the Department Chair who ultimately decides on advancing faculty for promotion.
5. *If joint/interdisciplinary, approval to appoint is also obtained from the other department(s) to appoint.*
6. *If joint/interdisciplinary, Memorandum of Agreement between departments is drafted, finalized and signed.*
7. Upon approval of both departments, the hiring process is initiated in the home department.
  - A. For salaried appointments
    - i. If the position has not yet been posted:
      1. Salary, funding source, space, and resources are established and submitted to MSPH salary review committee for approval.
      2. Job posting is developed and posted in RAPS and in an approved journal for 30 days.
    - ii. All applicants are reviewed; a minimum of 3- 4 are interviewed. Results of interviews are coded, selectee submitted to faculty affairs for affirmative action approval.
    - iii. Chair letter (from each department), personal data, I-9, tax forms, and CV are submitted to faculty affairs for final approval. Actual data entry can take two weeks to a month.
  - B. For non-salaried appointments
    - i. Chair letter, personal data, and CV are submitted to faculty affairs for final approval.
    - ii. Actual data entry can take two weeks to a month.

# Procedures and timelines

## Steps

### STEPS FOR PROMOTION TO ASSOCIATE OR HIGHER, EXCLUDING NOMINATIONS TO TENURE

(Additional steps necessary for joint or interdisciplinary appointments are noted in *italics*)

1. Can take a year or longer. *Joint/interdisciplinary promotions take longest, given the need for 1) two or more chairs to agree on nomination, MOA, and referee list, 2) two or more departmental COAPS to schedule and approve, and 3) two or more school level COAPS to schedule and approve.*
2. Faculty members seeking promotion submit the following and **meet with chair prior to December 31** to obtain initial approval
  - A. CUIMC format CV. Obtain the most recent guidelines from the Department of Epidemiology Director of Human Resources/Faculty Affairs.
  - B. Up to 4 page personal statement that addresses the arc of the nominee's career and describes the nominee's current research and teaching and plans for future projects, including role in the Department. See Appendix for more detail.
  - C. Copies of teaching evaluations
  - D. Copies of 5 scholarly publications that best characterize their work.

*If joint or interdisciplinary, the home department chair writes to the secondary department chair(s) in support of promotion. If secondary chair concurs, s/he indicates this in a return letter to primary chair.*

3. Epi chair conducts initial review to determine whether to go out for letters. The chair then presents the candidate's dossier to DCOAP, who vote on whether or not to go forward.
4. *If joint/interdisciplinary, approval is also obtained from the other department(s) to go out for letters.*
5. *If joint/interdisciplinary, a memorandum of agreement (MOA) between the departments is drafted, reviewed by each department and by faculty affairs, then circulated for signatures.*
6. A referee list is developed. The list should be between 12 – 15 academics at or above the rank that is being sought. (For nominations to tenure – documented separately – no Columbia affiliated referees are permitted.) Referees should be drawn from multiple institutions in the US and internationally to demonstrate the nominee's standing in his/her field. The chair and/or one or more senior faculty members review and finalize the referee list. *For joint or interdisciplinary appointments, there is input from both departments in the development of the list.*
7. Referee letters are requested via email, accompanied by the nominee's CV, personal statement, and 5 top publications. Referees are contacted periodically with polite but firm reminders. We seek but do not always achieve 100% response rate; reasons for failure to send letter are recorded, e.g., the referee is traveling, is unfamiliar with the nominee's research, etc. It takes about 6 months to collect all responses, sometimes longer. *For joint/interdisciplinary appointments, the letters are sent by the home department. They may be co-signed by the secondary department chair(s). Collection of the letters is the responsibility of the home department.*
8. The Epidemiology Committee on Appointments and Promotions (DCOAP) conducts the review:
  - A. A faculty member familiar with the nominee's research summarizes her/his accomplishments to the committee
  - B. CV, personal statement, teaching evaluations, 5 selected publications, and referee letters are reviewed
  - C. An open vote is taken to determine whether the case should go forward to the MSPH School COAP.

(CONTINUED FROM P. 12)

The Department maintains a record of the vote. Note: For promotions to full professor, only COAP members who are currently full professors are eligible to vote. Only tenured members of the COAP are eligible to vote on appointments and promotions for unmodified (tenured or tenure-track) titles. A quorum consisting of four or more Epi COAP members will be required for consideration of all appointments and promotions. For appointments and promotions of unmodified (tenured or tenure-track) titles, a quorum consisting of four or more tenured Epi COAP members will be required. COAP members may vote by email, if necessary. *For joint/interdisciplinary appointments, approval is also needed from the secondary department(s).*

9. All DCOAP votes are advisory and recommendations to the Department Chair who ultimately decides on advancing faculty for promotion.
10. Upon approval of letters by both department COAPs, a dossier is compiled including
  - A. Chair's letter (*from each department if joint/interdisciplinary*) and summary of teaching evaluations
  - B. CUIMC format CV
  - C. List of referees and all submitted letters
  - D. Five selected publications that best represent the work of the nominee
  - E. *Signed MOA if joint/interdisciplinary*
11. The case proceeds to the MSPH COAP. *If joint/interdisciplinary with a department in another School at Columbia, must also be approved by that School's COAP.*
  - A. MSPH COAP meets monthly between September and June. It may take two or more months to get on their agenda. The chair or a senior faculty member will present the nominee to the MSPH COAP, which will then discuss the nomination and vote confidentially.
  - B. The approval of school COAP(s) is the final step.

Steps

# Procedures and timelines

## STEPS FOR NOMINATION TO TENURE IN EPIDEMIOLOGY

(Additional steps necessary for joint or interdisciplinary appointments are noted in *italics*).

For further details, obtain the current Columbia University Provost Tenure Guidelines from the Department of Epidemiology Director of Human Resources/Faculty Affairs.

1. Takes place on a strict timeline.  
Faculty members seeking tenure submit the following and meet with the chair prior to December 31 of their 5th year.
  - A. CUIMC format CV. Obtain the most recent guidelines from the Department of Epidemiology Director of Human Resources/Faculty Affairs.
  - B. Copies of teaching evaluations
  - C. Personal statement that addresses the arc of the nominee's career and describes the nominee's current research and teaching and plans for future projects, including role in the Department. See guidelines for personal statement in the current Columbia University Provost Tenure Guidelines.
  - D. Copies of scholarly publications that best characterize their work
2. The chair convenes an ad hoc committee to consider the tenure nomination. The ad hoc comprises a mix of standing Epidemiology COAP members and, depending on the candidate's area of research, other tenured faculty with specific expertise in that area. An open vote of the ad hoc committee is taken to determine whether to proceed with the nomination to tenure. If the candidate is approved to move forward, members of the ad hoc committee may also contribute to the selection of referees, the preparation of the Statement of the Nominee's Qualifications, and the presentation of the nominee to the Epidemiology COAP.
3. *If joint/interdisciplinary, a memorandum of agreement (MOA) between the departments is drafted, reviewed by each department and by faculty affairs, then circulated for signatures.*
4. Two lists are developed in consultation with the chair and ad hoc committee (*and the other departments(s) if joint/interdisciplinary*).
  - A. Referees: Academics at or above the rank that is being sought. None can be affiliated with Columbia University. Referees should be drawn from multiple institutions in the US and internationally to demonstrate the nominee's standing in his/her field. All letters must be obtained from scholars who are independent from the candidate (e.g., who have not served as a mentor or collaborator and who meet a series of other markers of independence from the candidate. See Columbia University Provost Tenure Guidelines for further information.
  - B. Comparison scholars (can overlap with referees)
5. Tenure referee letters are requested via email, accompanied by the nominee's CV and personal statement. Referees are contacted periodically with polite but firm reminders. We seek but do not always achieve 100% response rate; reasons for failure to send letter are recorded, e.g., the referee is traveling, is unfamiliar with the nominee's research, etc. It takes about 6 months to collect all responses, often longer. (*For joint/interdisciplinary appointments, the letters are sent by the home department. They should be co-signed by the secondary department chair(s). Collection of the letters is the responsibility of the home department.*)
6. Three statements are prepared with support from Department chair and other senior department leadership at the request of the Department chair (*and the other department(s) if joint/interdisciplinary*):
  - A. Personal statement (refined from statement originally submitted to chair)
  - B. Statement of the nominee's qualifications (most important)
  - C. Department analysis and objectives



(CONTINUED FROM P. 14)

Steps

7. The Epi COAP is convened to vote as to whether the case should proceed to the MSPH COAP.
  - A. A faculty member familiar with the nominee's research summarizes her/his accomplishments to the committee
  - B. CV, statement, teaching evaluations, selected publications, referee letters, and the 3 statements described above are reviewed
  - C. An open vote is taken to determine whether the case should go forward to the MSPH School COAP and the Department maintains a record of the vote. Note: only tenured members of the COAP are eligible to vote on nominations to tenure. Only COAP members who are currently full professors are eligible to vote on promotions to full professor. A quorum consisting of four or more tenured COAP members is required. COAP members may vote by email, if necessary. Any votes of "no" must be followed up by a letter or email addressed to the Chair explaining the reason for that negative vote. *For joint/interdisciplinary, the other department's executive committee reviews.*
8. After the Epi COAP has voted, a letter with the candidate's CV and other relevant documents attached will be sent via email to all tenured faculty members in Epidemiology who do not have the level of Dean requesting a vote via email on the candidate's tenure application. Materials are made available to tenured faculty members ahead of time. The vote is open, and a record of votes is maintained by the Department. Any votes of "no" must be followed up by a letter or email addressed to the Chair explaining the reason for that negative vote.
9. All COAP votes are advisory and recommendations to the Department Chair who ultimately decides on advancing faculty for promotion.
10. Tenure dossier is prepared, including the elements in number 7B above plus:
  - A. Chair's letter (*including signature of other department if joint/interdisciplinary*) and summary of teaching evaluations
  - B. *Signed MOA if joint/interdisciplinary*
11. The case proceeds to MSPH COAP and then to CUIMC COAP.
  - A. MSPH COAP meets monthly between September and June. It may take two or more months to get on their agenda. The chair or a senior faculty member will present the nominee to the MSPH COAP, which will then discuss the nomination and vote confidentially.
  - B. The CUIMC COAP meets weekly between September and June but has a crowded agenda and may take two months to schedule.
12. Dossier is forwarded to provost's office for review by the Tenure Review Advisory Committee (TRAC) by December 15.
13. TRAC conducts final review by the end of May.
14. If tenure is approved, the effective date is July 1 of the current year.

# Procedures and timelines

Timeline

## SAMPLE TENURE TIMELINE

(Elements in *italics* are for joint and interdisciplinary appointments)

#	STEP	DATE	COMMENT
1	COAP format CV and personal statement to chair(s) with request for meeting; meet with chair for approval	Before December 31 of 5th year	
2	Chair(s) agree to pursue tenure	February of 6th year	
3	CV, first draft of personal statement, and teaching evaluations to departmental Epi ad hoc for vote whether to nominate and seek letters	March	
4	<i>If joint, other department approval to nominate/go out for letters if needed</i>	April	
5	Assemble list of potential referees and peers for comparison		Each department must approve lists
6	<i>Draft, finalize and sign MOA</i>		<i>Can take a few months, depending on issues of salary, space, and departmental contributions; can happen concurrently with referee letter process</i>
7	Send out requests for letters	May/June	Chair(s) from each department should sign
8	Referee responses collected	August/September	Home department is responsible for collecting letters
9	Draft and edit tenure statements for dossier		Tenure statements should be drafted early in the process with chair(s) and departmental ad hoc members
10	Epi COAP reviews and votes on dossier	September	
11	All tenured faculty review and vote on dossier	September	
12	<i>Other department COAP/executive committee approval to proceed to school level COAP</i>	September	
13	Finalize full dossier	September	
14	MSPH COAP	October	Dossier can be amended/updated between MSPH and CUIMC COAPs
15	CUIMC COAP	November	
16	Dossier to Provost's Tenure Review Advisory Committee (TRAC)	December	
17	University-wide tenure review	By May of 7th year	Decision from TRAC must be complete by May; this is final step before ratification by trustees

# Procedures and timelines



# Milestones

## SAMPLE TENURE CLOCK MILESTONES

MILESTONE	BASIC	WITH ETD	WITH ETD AND CHILDCARE
Professorial title begins	2023	2023	2023
Fourth year review	2026/27	2026/27	2026/27
Childcare exemption	No	No	Yes
ETD	No	Yes	Yes
Department tenure decision	early 2029	early 2030 (moved up 1 year)	early 2031 (moved up 2 years)
TRAC review complete	May 2030	May 2031	May 2032
“Up or out” date	June 2031	June 2032	June 2032

### Stopping the clock: ETD

The ETD (exemption from teaching duties) emerged within the “downtown” context where faculty teach full time; we are beneficiaries of this policy. Eligibility is based on exceptional teaching/service while on tenure track and formal approval from the Chair. Procedurally, the candidate meets with Chair to apply; candidate prepares formal letter; the Chair prepares letter of support. The Provost adjudicates request; approval is not guaranteed. The ETD is generally accompanied by some reduction in teaching or service. The candidate remains an active contributing member of the Department, in line with typical faculty teaching or service expectations.

### Stopping the clock: Childcare statute

Eligibility to stop the tenure clock is based on the candidate being primary parent for a child under 1 year of age. Procedurally, it requires a formal letter and proof of the birth/adoption of a child. The childcare exemption is granted under University statute by the Provost. There is a limit of 2 such exemptions per faculty member.

# Summary of required documents

# Documents

## SUMMARY OF DOCUMENTS REQUIRED FOR FACULTY APPOINTMENTS AND PROMOTIONS

### Assistant Professor and above

- CV in CUIMC COAP format. Obtain the most recent guidelines from the Department of Epidemiology Director of Human Resources/Faculty Affairs.
- Up to 4 page personal statement that addresses the arc of the nominee's career and describes the nominee's current research and teaching and plans for future projects, including role in the Department. See Appendix for more details.
- *If joint or interdisciplinary, a memorandum of agreement between departments/centers.*

### Additional elements for Associate Professor and above

- List of referees. Referees should be academics at the level of the appointment being sought or higher. There should be representation from a variety of U.S. institutions and international institutions.
- Teaching evaluations.
- PDFs of selected publications that best represent the candidate's research career.

### Further additional elements for tenure application

Obtain the current Columbia University Provost Office Tenure Guidelines from the Department of Epidemiology Director of Human Resources/Faculty Affairs.

### Lists

- None can have a Columbia affiliation.
- These can/should overlap with referees.

### Statements

- Statement of the Nominee: See the Columbia University Provost Office Tenure Guidelines for further information.
- Statements prepared by the office of the Department Chair:
  - Department Analysis and Objectives: This document discusses the current state of the nominating department and its future direction, and describes the needs the proposed appointment is expected to fill. It is not used to discuss the nominee's qualifications but rather to establish the importance of the appointment in the plans of the department.
  - Statement of the Nominee's Qualifications: This document evaluates the nominee's scholarly achievements and potential for future growth, describes his or her teaching abilities, and compares the candidate with the leading scholars in the field. It also discusses how the nominee's qualifications as a scholar and teacher will further the objectives of the departments or schools described in the Analysis above.

# Appendix

## GUIDELINES FOR WRITING THE PERSONAL STATEMENT FOR NON-TENURE TRACK APPOINTMENTS

For guidelines for the personal statement for tenure-track appointments, see the current Columbia University Provost Office Tenure Guidelines.

The personal statement is a narrative accompaniment to the CUIMC format CV, and provides reviewers with an expanded frame of reference to evaluate the candidate. In instances when the candidate is preparing for a tenure nomination, the personal statement will undergo substantial revision and expansion under the guidance of the candidate's mentor, the Department Chair, and other senior faculty in the Department.

Candidates should provide summary information (both qualitative and quantitative) about each of the following:

1. **Research and scholarship.** This is a summary of your research interests, achievements, and direction. It is essential to highlight and fully draw out the uniqueness of the scholarly contributions in this section of the statement. This section should be presented in parts, described below.
  - A. Introduction: Very briefly sum up your area of research.
  - B. 2-4 specific primary research foci: Characterize your 2-4 primary research foci, citing key publications and addressing the significance of your findings. For each area of focus, characterize what we now know that we had not known previously as a result of your work, and how future research will build on your work.
  - C. Metrics: Provide a brief summary of your scholarly publication record and grant activity, including your role as a Principal Investigator and funding amounts.

Note: Candidates pursuing appointment or promotion in the applied public health or educational scholarship tracks should here summarize their peer-reviewed publications and/or equivalent track record in books, reports, and articles addressing public health practice/educational scholarship, as appropriate.

2. **Teaching and mentoring.** This should provide a summary of courses taught, a summary of teaching evaluations, and a summary of mentoring activities. Highlight any special recognition received for excellence in teaching or mentoring. Candidates seeking appointment or promotion in the educational scholarship and leadership track should expand this section to address educational achievements such as development of educational materials, curricular offerings and methods, and the extent to which these developments have affected local and national educational practice.
3. **Service and practice engagement.**
  - A. Citizenship: Participation in and contribution to the intellectual life and educational mission of the Department, School, and University.
  - B. Practice: Activities that directly affect the health of the public. Candidates seeking appointment or promotion in the applied public health track should expand this section to address accomplishments in this domain such as the development and/leadership in the application of guidelines, policies, or technology that change public health practice.
4. **Leadership in the field.** This section refers to your service and activities on scholarly journals, local, national, and international committees and panels, and in professional organizations. It should comment on leadership activities, including interdisciplinary activities, and provide an accurate reflection of your stature in your field, locally, nationally, and internationally.

The statement should be up to four pages in length, single-spaced, in Calibri 11 point font. The statement should reflect in all four categories what your role in the Department will be. For promotions within the Department this typically emerges naturally in 1 – 4 above. For new appointments to Epidemiology, your anticipated contribution should be reflected in as many of the above categories as appropriate. You should attach a bibliography of cited papers. This will not be counted as one of the four pages of the statement.