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KELLEY SCHOOL OF BUSINESS

INDIANA UNIVERSITY

GUIDANCE STATEMENT ON THE CLINICAL RANK IN THE KELLEY SCHOOL OF BUSINESS¹

(Indianapolis Campus)

Draft October 4, 2018

This document refers to many IU and IUPUI Policies / Guidelines, which affect clinical faculty and which are frequently updated, and therefore, the document provides guidance for clinical faculty. Clinical faculty should make sure that they have the most current versions of the documents.

Various Indiana University (IU) policies refer to clinical faculty. For example,

- *The prefix “Clinical” is used for appointees whose primary duties are teaching students and residents/fellows and providing professional service in the clinical setting. Titles: Clinical Professor, Associate Clinical Professor, Assistant Clinical Professor; or Clinical Senior Lecturer and Clinical Lecturer. (IU Policy ACA-14)².*
- *Clinical faculty may be involved in research that derives from their primary assignment in clinical teaching and professional service; however, continued appointment and advancement in rank must be based on performance in teaching and service. ... Clinical faculty may contribute to the research efforts of a unit through their clinical work, but they are not expected to do individual research. (IU Policy ACA-18, Regulation of Clinical and Lecturer Appointments).*

Business is an applied discipline. The Kelley School of Business strongly believes that clinical faculty contribute to the learning environment in the School through teaching, service, scholarly activity, mentoring, and contacts with businesses, governments, professional societies, and other organizations.

Discussion of the Terms Research, Creative Activity, and Scholarly Activity

Appendix 2 includes a discussion of the terms research, creative activity, and scholarly activity. These terms are used in various IU Policies and IUPUI P&T standards. These terms include requirements for dissemination of scholarship, including peer-reviewed scholarship. Clinical faculty will need to consult with Kelley Indianapolis Executive Dean about appropriate scholarly

² The Academic Handbook has been replaced with IU Policies. <https://policies.iu.edu/https://policies.iu.edu/categories/academic-faculty-students.html>

activity documentation for annual reviews and promotion. Appendix 3 provides a scholarship matrix that provides examples of various types of scholarship which should assist clinical faculty.

Difference in IU Bloomington and IUPUI Campus Clinical Faculty Promotion Requirements

While both IUB and IUPUI (effective for 2018-19) provide that a clinical faculty member can be promoted as a balanced case (highly satisfactory in both teaching and service), IUPUI P&T policies have an explicit requirement for peer-reviewed scholarship in teaching and service for a successful balanced case.³ Similarly, to be considered excellent in teaching or service, the faculty member must have peer-reviewed scholarship to support that area, either scholarship of teaching or scholarship of service. Peer-reviewed scholarship is broadly defined at IUPUI. While peer-reviewed scholarship can include peer-reviewed research, it can also include other peer-reviewed activities, such as research reports, pedagogical work, conference presentations, blogs, etc. (See Appendix 3 for examples.) Accordingly, clinical faculty will need to meet the campus-specific requirements for promotion.

DISCUSSION OF CLINICAL FACULTY POLICIES

I. RESPONSIBILITIES

Clinical faculty members are required to contribute in the areas of teaching and service, but not research. Normally they should excel in either teaching or service, and be at least satisfactory in the other area. Additionally, on both the Bloomington and IUPUI campuses, a candidate may present evidence of balanced strengths across both teaching and service that promise excellent overall performance of comparable benefit to the university.⁴

The standard teaching load for clinical faculty is 18 credit hours, or the equivalent, per academic year. In addition, clinical faculty are expected to contribute to the service mission of the Kelley School of Business. Although research is not included as a basic responsibility of clinical faculty,

³ This draft reflects the IUPUI Approved Balanced Case for promotion for Clinical Faculty in 2018-19. <https://academicaffairs.iupui.edu/AAContent/Html/Media/AAContent/02-PromotionTenure/PromotionAndTenure/PTGuidelinesCLEANfuture.pdf>

⁴ **Balanced case:** *In some circumstances, faculty may present a record of highly satisfactory performance across all areas sufficient to demonstrate comparable long-term benefits to the University. If so, tenure-track faculty have the option of presenting a balanced case dossier across all three areas of endeavor (teaching, research, service) while clinical-track faculty have the option of presenting a balanced case across two areas of endeavor (teaching, service). It is understood that peer-reviewed scholarship is required for achieving a highly-satisfactory rating in each area of performance in a balanced case. However, the promotion and/or tenure standards in many departments/units encourage the choosing of one area of excellence. Faculty should be aware of the requirements of their department/unit.* (pp. 29-30, 2018-19 IUPUI P&T Guidelines). Note that for a balanced case, IUPUI clinical faculty must demonstrate scholarly activity in both teaching and service.

scholarship related to the faculty member's teaching and/or service in an academic setting will be considered as evidence of teaching or service excellence, and other types of scholarship may be considered as evidence of intellectual engagement in the professional field that is indicative of long-term intellectual contributions valuable in classroom settings (see Appendix 2 and 3 for further discussion).

Both undergraduate and graduate students at the Kelley School of Business are routinely involved in outreach activities in the business community. Accordingly, clinical faculty may be expected to lend their experience and leadership, in concert with other faculty and staff, to carefully monitor these outreach activities and evaluate students and the projects associated with them. Clinical faculty may hold all administrative positions in the Kelley School of Business, except appointments where they would be involved in making tenure, promotion, or faculty hiring decisions involving tenure-related positions.

II. APPOINTMENT

In order to be designated as a clinical faculty member, a person generally will be expected to have the following characteristics: extensive business or government experience; contacts with businesses, individuals, and other organizations that will contribute to the learning environment, internships, and placement of students within the Kelley School of Business; exceptional classroom potential; and an ability to work with students in one-to-one and small group settings. In addition, clinical faculty generally will be expected to hold a terminal degree (PhD or JD), although this requirement may be waived when a person's other qualifications are particularly strong. Clinical faculty also must initially meet (and maintain) faculty qualification standards, as defined jointly by the Association to Advance Collegiate Schools of Business), the Higher Learning Commission, and the Kelley School of Business. Appointment to the rank of clinical faculty is not a natural progression for individuals holding lecturer or senior lecturer status.

Clinical faculty can be appointed at the assistant, associate, or full levels. Pursuant to Indiana University policy: *Initial clinical appointments should be at the level appropriate to the experience and accomplishments of the individual. The process of appointment with probationary status or appointment with long-term contract shall go through the ordinary procedures for faculty appointments.* (IU Policy ACA-18). Hiring votes for clinical faculty positions at the department level should include both tenure-track and clinical faculty.

A. Probationary Period

Depending on their experience, clinical faculty generally will be hired for an initial three-year contract and will be on probationary status for a maximum period of six years. Clinical faculty appointments during this probationary period shall be governed by the same policies and procedures with regard to appointment, reappointment, non-reappointment, and dismissal as apply to tenure-probationary faculty during their probationary period; however, clinical faculty shall not be evaluated on research or research-related activities. On the IUPUI campus, the clinical faculty member will be evaluated on scholarship of teaching or scholarship of service related to the

faculty member's declared area of excellence. *Clinical faculty appointments during the probationary period shall be subject to the same policies and procedures with respect to appointment, reappointment, non-reappointment, and dismissal as apply to tenure-probationary faculty during the probationary period.* (IU Policy ACA-18).

During the probationary period, clinical faculty should receive annual written evaluations from their department chair or equivalent supervisor. *Clinical faculty appointments during the probationary period shall be subject to the same policies and procedures with respect to appointment, reappointment, non-reappointment, and dismissal as apply to tenure-probationary faculty during the probationary period.* (IU Policy ACA-21) To ensure that courses are being taught in a competent manner by qualified individuals, this evaluation should employ the customary measures of classroom effectiveness. In general, the evaluation should be based on the instructor's teaching contributions, as well as a review of service contributions. At a minimum, the teaching evaluation should include results on student evaluation forms. It may also include: course development; peer evaluations of teaching; grading standards; instructional leadership; participation in various training programs; scholarship related to teaching; grants; and any other examples of pedagogical training and improvement that are deemed appropriate. The evaluation of service should consider contributions in areas such as: leadership in the development, design, and management of academic programs; administrative assignments; fostering contacts with the business community; recruiting activities; coordination of multi-section courses; working with student groups; scholarship related to service; grants; significant service to the university, profession, or community, etc.

B. Post-Probationary Period

IU policies provide for a long-term contract for clinical faculty in the post-probationary period.

Clinical appointees are not eligible for tenure; however, in order to protect their academic freedom, individuals appointed as clinical faculty shall be given long-term contracts after a probationary period of not more than seven years. The exact mechanism for this shall be determined by the dean and the faculty governance body within each school using clinical appointments and be approved by the chancellor/provost, but the mechanism should be a long-term contract of not less than five years or be some equivalent, such as a rolling three year contract. The criteria for granting long-term contracts after a probationary period shall be analogous to the criteria for granting tenure, except that clinical faculty shall earn the right to a long-term contract on the basis of their excellence only in those responsibilities that may be assigned to them. Each school will establish procedures and specific criteria for review of individuals concerning the renewal of long-term contracts or their equivalent. (IU Policy ACA-18).

The review process for clinical faculty to move from the probationary period to the post-probationary period should follow the normal faculty procedures used in the Kelley School of Business for tenure-track faculty with the exception that for clinical faculty research activities or productivity will not be a criterion. However, scholarship related to teaching and service will be

considered. Thus, before any decision is made within the department or School, the clinical faculty member should be notified that he or she is under such consideration and that within a reasonable period of time, such as four to six weeks, he or she should prepare a dossier for review.

The dossier should follow the guidelines for teaching and service documentation for faculty on tenure-related appointments. It should include teaching awards, peer evaluations, invitations to give workshops, student evaluations, curriculum development, assessment protocols, other measures of teaching effectiveness and innovation and service contributions. Indianapolis faculty should also include evidence related to the scholarship of teaching and/or service. Because the clinical appointments primarily are related to teaching and service, the dossier should clearly demonstrate the faculty member's participation in School and campus learning activities such as SOTL (Scholarship of Teaching and Learning) or CTL (Center for Teaching and Learning) and teaching workshops and leadership in School activities that are designed to improve the learning environment for students. Further, the dossier should include a clear statement by the clinical faculty member describing his or her philosophy of teaching and service contributions.

These dossier materials then will be reviewed by the tenure-track and clinical faculty members of comparable rank in the candidate's department, the department chairperson or equivalent supervisor, and the Faculty Review Committee, who will provide a recommendation to the Dean of the Kelley School of Business as to whether the candidate should be appointed to a multi-year contract. A multi-year contract is typically for five years. If the decision is for non-reappointment, the last year of the appointment will be the separation year. Because of the difference in the requirements for the Bloomington and Indianapolis campuses for Clinical promotion, the Executive Associate Dean Faculty and Research on the IUPUI campus will appoint a separate Clinical Faculty Review Committee to review the promotion materials of Clinical Faculty on the Indianapolis campus.

Prior to the last year of any post-probationary term of appointment, the department chair or equivalent supervisor will evaluate the clinical faculty member's performance and make a recommendation to the Dean regarding whether the clinical faculty member should be reappointed for another multiyear contract. Reappointment should not occur for clinical faculty who do not demonstrate excellence in teaching or service on either the Bloomington or Indianapolis campuses, or a balanced case of highly satisfactory performance in both teaching and service activities. If the decision is for non-reappointment, the last year of the appointment will be the separation year.

Dismissal of clinical faculty after the probationary policy is addressed in IU Policy ACA 18.

After the probationary period, dismissal of a clinical faculty member holding a longer term contract which has not expired may occur because of closure or permanent downsizing of the program in which the faculty member teaches and serves; otherwise, dismissal of such clinical faculty shall occur only for reasons of professional incompetence, serious misconduct, or financial exigency. Non-reappointment of clinical faculty to a new contract term may occur for the foregoing reasons or may occur as well for reason of changing staffing needs of the clinical

program. Non-reappointment decisions regarding clinical faculty holding a long-term contract after the probationary period must be made with faculty consultation through processes established by the school's faculty governance institutions. The jurisdiction of campus faculty grievance institutions includes cases of dismissal and non-reappointment of clinical faculty.

C. Promotion

Promotion should go through the normal faculty procedures used in the Kelley School of Business for tenure-track faculty with the exception that for clinical faculty, research activities or research productivity will not be a criterion (however, scholarly activity will be used at IUPUI and may be used at IUB to support the case). The candidate will be reviewed by the tenure-track and clinical faculty members of comparable rank in the candidate's department, the department chairperson or equivalent supervisor, and the Faculty Review Committee, which will provide a recommendation to the Dean of the Kelley School of Business. Clinical faculty may be awarded promotion on the basis of a teaching, service, or balanced case on both the Bloomington and IUPUI campuses.⁵ For Indianapolis faculty, scholarship related to teaching and scholarship related to service is required to be considered for determining excellence, and scholarship in both teaching and service is required to support a balanced case.

Before any decision is made within the department or School, the clinical faculty member should be notified that he or she is under such consideration and that within a reasonable period of time, such as four to six weeks, he or she may submit materials relevant to such consideration for review by the appropriate department or area supervisor (IU ACA-22). Promotion requires the preparation of a dossier. The documentation in a dossier for promotion within the clinical ranks is similar, but not identical, to the documentation presented in the teaching and service sections of dossiers of tenure-track faculty. For IUPUI, dossier preparation is discussed in the most current IUPUI Promotion and Tenure Guideline). Letters from external reviewers will be solicited for clinical faculty members seeking promotion.

Criteria for Promotion (IU Policy ACA-38)

Teaching, research and creative work, and services which may be administrative, professional, or public are long-standing University promotion criteria. Promotion considerations must take into account, however, differences in mission between campuses, and between schools within some campuses, as well as the individual's contribution to the school/campus mission. The relative weight attached to the criteria above should and must vary accordingly. A candidate for promotion [or tenure] should normally excel in at least one of the above categories and be at least satisfactory (research/creative activity; service) or effective (teaching) in the others. In exceptional cases, a candidate may present evidence of balanced strengths that promise excellent overall performance of comparable benefit to the university. In all cases the candidate's total record should be assessed by comprehensive and rigorous peer review. Promotion to any rank is a

⁵ Note that while research is not a category in which clinical faculty are rated, in accordance with Bloomington Faculty Council (BFC) policy, research activity may be used to meet criteria for teaching and service.

recognition of past achievement and a sign of confidence that the individual is capable of greater responsibilities and accomplishments.

If the decision is not to promote the faculty member and move to a post-probationary period, IU Policy ACA-22 describes the notice requirement and the process to review the non-reappointment decision.

III. ANNUAL REVIEW

IU Policy ACA-21 describes the policy of annual review, and IU Policy ACA-25 describes the requirement for faculty to prepare an annual report. Clinical faculty should receive annual written evaluations from their principal administrator (IU ACA-21). In general, the evaluation should be based on teaching contributions, as well as a review of service contributions. The teaching evaluation should be based upon consideration of: student and/or peer evaluations of teaching; course development efforts; the creation of cases and other original teaching materials; instructional leadership; participation in various training programs; scholarship related to teaching; and any other examples of pedagogical training and improvement that are deemed appropriate. The evaluation of service should be based upon contributions in the following areas: leadership in the development, design and management of academic programs; administrative assignments; fostering contacts with the business community; recruiting activities; coordination of multi-section courses; working with student groups; significant service to the university, profession, or community; scholarship related to service; etc. Reappointment of probationary clinical faculty should be predicated on satisfactory performance on these annual evaluations.

In addition to their teaching and service contributions at Kelley Indianapolis, full-time Clinical faculty with terminal degrees (e.g., PhD, JD) are expected to achieve Scholarly Academic (SA) status, [as defined jointly by The Association to Advance Collegiate Schools of Business (AACSB)⁶ and the Kelley School of Business], as quickly as possible after their initial appointment.⁷ The basis for qualification is described in the Indiana University Kelley School of Business Policy on Faculty Qualifications. Progress toward SA, PA, SP, or IP qualification will be taken into consideration by department chairpersons or equivalent supervisors when determining contract renewals following the initial contract, for annual performance reviews, and for annual salary decisions.

⁶ From time to time, the AACSB changes the classifications and definitions of classifying scholarly activity. Kelley School policies are updated to reflect new classifications and definitions.

⁷ To achieve SA or PA status a faculty member must have a terminal degree (e.g., Ph.D. or JD). Faculty without a Ph.D. or JD, may be considered for SP or IP.

APPENDIX 1. IUPUI Campus and IU Policies:

Selected Specific Policies:

- [University Policy ACA-12](#) General Provisions Regarding Academic Appointments
- [University Policy ACA-14](#): Classification of Academic Appointments
- [University Policy ACA-18](#): Regulation of Clinical and Lecturer Appointments
- [University Policy ACA-21](#) Faculty and Librarian Annual Reviews
- [University Policy ACA-22](#) Reappointment and Non-Reappointment During Probationary Period.
- [University Policy ACA-25](#) Annual Reports for Faculty and Librarians
- [IUPUI Faculty Guide \(Updated July 1, 2016\)](#): See pages 13 (Faculty Membership on the IFC), 28 (Bylaw Article IV.A.1 – Faculty Grievances), 63 (Classification – who can be an associate dean?), and 86 (Emeritus Policy)
- [IU Faculty Work](#): This is a policy that governs all faculty and describes how they are to work.
- IUPUI 2018-19 Promotion and Tenure Guidelines: Clinical Faculty should refer to the most recent P&T Guidelines when considering promotion.
<https://academicaffairs.iupui.edu/AAContent/Html/Media/AAContent/02-PromotionTenure/PromotionAndTenure/PTGuidelinesCLEANfuture.pdf>

Related Policies:

- [University Policy ACA-12](#): General Provisions Regarding Academic Appointments (This policy refers to clinical appointments, but isn't specifically about them.)
- [University Policy ACA-33](#): Code of Academic Ethics (Clinical appointments must adhere to this policy as well.)

APPENDIX 2. DISCUSSION OF TERMS RESEARCH AND CREATIVE ACTIVITY, SCHOLARLY ACTIVITY

The following statement in the 2018-19 IUPUI P&T standards pertains to clinical faculty.

Clinical faculty are required to be excellent in either teaching or service and satisfactory in the other area. They have no formal research requirements for promotion although scholarship is required in their area of excellence.

The question for clinical faculty is what constitutes scholarship. Scholarship is not defined in IU Policies or in the IUPUI P&T document. However, in the P&T document, the guidelines provide descriptions of areas of excellence and expectations for various faculty categories. For example, for promotion to tenure-track associate / full professor, the standard for excellence is stated as:

Associate: Record of nationally and/or internationally disseminated and peer reviewed scholarship. Emerging national reputation.

Full: Record of nationally and/or internationally disseminated and peer reviewed scholarship. A sustained national reputation as demonstrated by a well-established and cumulative body of work in rank. (p.36).

Note that research is not mentioned, but peer reviewed scholarship is mentioned.

For promotion to clinical associate or full professor, the standard of excellence is stated as:

Associate: Record of publicly disseminated and peer reviewed scholarship in area of excellence.

Full: Record of sustained, nationally and/or internationally disseminated and peer reviewed scholarship in area of excellence. Special circumstances where scholarly productivity has been interrupted can be considered. (37)

Research is not mentioned, but peer reviewed scholarship is mentioned.

Documentation of research and scholarly activity is discussed 2018-19 IUPUI P&T standards (41-42), and suggested standards for evaluating research and scholarly activity are discussed (43).

APPENDIX 3. Clinical Faculty Promotion and Scholarship Matrix, Kelley School of Business Indianapolis

This appendix contains excerpts from the latest IUPUI Promotion and Tenure Guidelines (2018-2019), and a Scholarship Matrix provides examples of types of scholarly activity.

IUPUI 2018-19 Promotion and Tenure Guidelines Provide the Expectations Related to Promotion.

Clinical faculty are required to be excellent in either teaching or service and satisfactory in the other area. They have no formal research requirements for promotion although scholarship is required in their area of excellence. (p. 30)

To be considered excellent in teaching or service on the IUPUI campus, the faculty member must have *peer-reviewed scholarship* to support that area, either scholarship of teaching or scholarship of service. Beginning in 2018-19, the IUPUI 2018-19 P&T Guidelines provide for an IUPUI clinical faculty to be considered on a balanced case. To support a balanced case, the faculty member will need peer-reviewed scholarship in both teaching and service areas.

Standard for Excellence (over and above a record of quantity, quality, and impact of internal work) (p. 37).

- Advancement to Clinical Associate Professor: *record of publicly disseminated and peer reviewed scholarship* in area of excellence.
- Advancement to Clinical Professor: *record of sustained, nationally and/or internationally disseminated and peer reviewed scholarship* in area of excellence.

In some instances, and particularly for the lecturer and clinical ranks, publication may not be the most effective or feasible means of disseminating the results of effective teaching practices or pedagogical research. When other forms of disseminating results are more appropriate, this fact should be explained and those evaluating the candidate's work at the primary, unit, and campus levels should consider this alternative form of dissemination. Candidates and department chairs (or deans) may wish to take special care in explaining why alternative forms of dissemination may better fit with standards in the field. (p. 19)

This following **Scholarship Matrix** is offered as a comprehensive, but not exhaustive list of scholarship exemplars from the schools that have clinical track faculty. Examples of types of activities are shown in Bold below. These categories are not intended to be a check list but rather to show types of activities that reflect scholarship of teaching or service. As noted in the previous sections, peer-reviewed scholarship is required for clinical promotion at IUPUI.

School	Representative Clinical Faculty Scholarship Related To	
	Teaching	Service
Business	Dissemination occurs at many levels. Unlike tenure track faculty who are expected to meet promotion criteria primarily based on publications in peer reviewed journals recognized for their prominence in the field, clinical faculty are expected to focus on a broader range of activities including presentations, publications in both peer and non-peer reviewed journals, professional publications, books, book chapters, cases, grants, cases, and service learning. The different ways in which clinical faculty may choose to engage in the dissemination of their scholarship are described below.	Dissemination occurs at many levels. Unlike tenure track faculty who are expected to meet promotion criteria primarily based on publications in peer reviewed journals recognized for their prominence in the field, clinical faculty are expected to focus on a broader range activities including presentations, publications in both peer and non-peer reviewed journals, professional publications, grants, serving on boards, conducting workshops, service learning, and running or establishing programs. The different ways in which clinical faculty may choose to engage in the dissemination of their scholarship are described below.
	Presentations – Clinical faculty members will make presentations related to pedagogical techniques or application of discipline specific material related to the faculty members teaching. Clinical faculty members engage largely in departmental seminars and local/regional/national conferences. These may include invited presentations by companies, colleges, or professional organizations. Some presentations may be made at national and international conferences.	Presentations – Clinical faculty members will make presentations related to their service through participation in a center, colleges, non-profit or industry. Clinical faculty members engage largely in departmental seminars and local/regional/national conferences. These may include invited presentations by companies, colleges, or professional organizations. Some presentations may be made at national and international conferences.
	Publications –The expectation is that IUPUI clinical faculty members will engage in scholarly activity and disseminate evidence of that activity, and some of the scholarly activity will lead to publications. Because the teaching load and service engagement load for clinical faculty are higher than tenure-track faculty, the numbers of publications should be fewer than that expected for tenure-probationary faculty, and a wider array of outlets should be considered. In each case, evidence of greater	Publications – The expectation is that IUPUI clinical faculty members will engage in scholarly activity and disseminate evidence of that activity, and some of the scholarly activity will lead to publications. Because the teaching load and service engagement load for clinical faculty are higher than tenure-track faculty, the numbers of publications should be fewer than that expected for tenure-probationary faculty, and a wider array of outlets should be considered. In each case, evidence of greater readership or audience dissemination will be

<p>readership or audience dissemination will be viewed favorably; however, this emphasis should not discourage specialization. Publications may include:</p> <ul style="list-style-type: none"> • Journal articles (peer or non-peer reviewed) related to the discipline taught by the faculty member • Cases related to the discipline taught by the faculty member. Cases may be on local companies, provided primarily to our students or to national audiences. • Textbooks or other books related to the discipline • Chapters of textbooks or other books related to the discipline • Faculty may prepare pedagogical materials used as ancillaries to textbooks or as journal publications. • Reports and grants related to assessment of learning and evidence of pedagogical development that informs the teaching and learning of other academics. • Contributions to local and national news media outlets. While quotes are examples of excellent service, for publication the primary writer should be the faculty member. • Web pages or other electronic aids to facilitate learning and instructional techniques. • Assessments of effects pedagogy on students' knowledge and skills disseminated in conference papers or other venues. • Other materials reflecting scholarly activity <p>The more a clinical faculty member can document how others use the materials, the stronger the argument for impact. Evidence of impact should focus on breadth, thematic and coherent content, and be related to professional goals.</p>	<p>viewed favorably; however, this emphasis should not discourage specialization. Publications may include:</p> <ul style="list-style-type: none"> • Journal articles (peer or non-peer reviewed) related to their service • Reports and grants related to their service • Contributions to local and national news media outlets. While quotes are examples of excellent service, for publication the primary writer should be the faculty member. • Web pages or other electronic aids to facilitate service • Service contributions to the academy in the faculty member's area that are evidenced by reports or other written dissemination • Contributions to the unit and IUPUI that are evidenced by reports or other written dissemination <p>The more a clinical faculty member can document how others use the materials, the stronger the argument for impact. Evidence of impact should focus on breadth, thematic and coherent content, and be related to professional goals.</p>
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	<p>Obtaining Grants Related to Teaching Activities. Competitive grants that support teaching activities can be seen as scholarship because the applications are often subject to peer-review. These are even more powerful when the grant supports the clinical faculty member to study and disseminate what is learned from the grant activity.</p>	<p>Obtaining Grants Related to Service Activities. Competitive grants that support service activities can be seen as scholarship because the applications are often subject to peer-review. These are even more powerful when the grant supports the clinical faculty member to study and disseminate what is learned from the grant activity.</p>
	<p>Workshops. Being asked to facilitate and organize in-service workshops with other academics or professionals can be viewed as public dissemination of teaching techniques or discipline specific material. FACET membership (not required but example of excellence) or other teaching awards are examples of dissemination. Workshops can be internal to the School, internal to the campus, or external to the campus.</p>	<p>Workshops. Being asked to facilitate and organize in-service workshops with other academics or professionals can be viewed as scholarship because this is public dissemination of techniques or discipline specific material. Workshops can be internal to the School, internal to the campus, or external to the campus.</p>
	<p>Service Learning engages local businesses and non-profit organizations, disseminates teaching techniques, and engages the community in the educational process, while promoting students for future employment in the community, and documentation of impact can be viewed as public dissemination.</p>	<p>Service Learning engages local businesses and non-profit organizations, disseminating services and engaging the community in the educational process, while promoting students for future employment in the community, and documentation of impact can be viewed as public dissemination.</p>
	<p>Materials that are innovative and used beyond campus: videos, CDs, modules with reviews or data that demonstrate impact can be viewed as public dissemination.</p>	<p>Materials that are innovative and used beyond campus: videos, CDs, modules with reviews or data that demonstrate impact can be viewed as public dissemination.</p>
		<p>Serving on Boards. Being asked to serve on boards of businesses or non-profits can be viewed public dissemination of techniques or discipline specific material.</p>

		<p>Running or Establishing Programs for the University or Professional Organizations engages university administration, faculty, and practitioners in service and engages the community in the educational process. Presentations and reports on establishing or changing programs disseminates the concepts locally and perhaps regionally and nationally as other programs may adopt or follow the practices of our new programs.</p>
	<p>Promotion from Assistant to Associate and Promotion from Associate to Full No quantitative guidelines are used in total or in any one category. The faculty member should demonstrate how the scholarship of teaching reflects and supports the teaching mission. The faculty member should provide evidence of excellence and impact. For promotion from Associate to Full, the faculty member should demonstrate a significant additional contribution since being promoted to Associate.</p>	<p>Promotion from Assistant to Associate and Promotion from Associate to Full No quantitative guidelines are used in total or in any one category. The faculty member should demonstrate how the scholarship of teaching reflects and supports the teaching mission. The faculty member should provide evidence of excellence and impact. For promotion from Associate to Full, the faculty member should demonstrate a significant additional contribution since being promoted to Associate.</p>