Position Analysis Memorandum

U:	
FROM:	
DATE:	
SUBJECT:	
The Department/College is requesting approval to i	nitiate a search to hire:
We feel that departmental needs will be best serve specialty falls within the scope of the Department/C	
	· ·
The department faculty and I are strongly committe	d to giving candidates from the protected groups
	ameters of this position. We intend to use the fol-
owing links and resources:	·
Screening and Soloction Parameters	
Screening and Selection Parameters	
The table below summarizes the minimum qualifica	
The table below summarizes the minimum qualifica	ations, selection criteria, and sources of evidence dications. (Must match requisition, Ad, and matrix)
The table below summarizes the minimum qualifica	
The table below summarizes the minimum qualificates the search committee will use in screening app	lications. (Must match requisition, Ad, and matrix) How Measured:
The table below summarizes the minimum qualifications: Minimum Qualifications:	How Measured: Examples: (should be from required application documents) CV/Resume, CoverLetter
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Preferred Qualifications:	How Mea	How Measured:			
Examples: Fellowship in, Experience in Experience in teaching medical students, residents, and fellows.			(should be from required application documents) CV/Resume, Cover Letter, Letters of Recommendation		
Experience in teaching medical students, residents, and fellows. A demonstrated commitment to diversity, equity, inclusion, and student success, as well as working with broadly diverse communities. (*Required)			, , , , , , , , , , , , , , , , , , , ,		
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The search and screening co	ommittee is diverse	e and consists	of:		
Name	Gender	Ethnicity		Implicit Bias Trainin	g
		-		○Yes ○No	J
				○Yes ○No	
				○Yes ○No	
				○Yes ○No	
				○Yes ○No	
				○Yes ○No	
				0.130	
The Course Countington and		- C		-les	1: _:4
The Search Coordinator and Bias Training.	all members of the	e Search Con	imiliee nave ta	aken the required impi	ICIL
Dias Trailling.					
The committee will review a	I application mater	ials received l	by the For Bes	st Consideration date a	and
identify bona fide applicants			•		
applications will not be cons					
applications on the selection		•		•	
each criterion along a scale identify a group of semifinali		ening matrix.	Results of the	se ratings will be used	1 10
identity a group of semilinan	313.				
All applicants from members	s of protected grou	ps will be give	en a "second l	ook" to ensure full con	ısider
ation. Of the semifinalists, the					
Name. Title. Date			Name, Title.	Date	

CON, COP, COPH, and HSLIC please use signature lines for Dean/Executive Director and Director for Faculty Academic Affairs for approvals.

SEARCH COORDINATORS: PLEASE NOTE THIS IS THE MINIMUM REQUIRED INFORMATION NEEDED. YOU MAY CHANGE INFORMATION OR EMBELLISH AS NEEDED BUT PLEASE STICK TO THE TEMPLATE AND STANDARD INFORMATION.