



OVCA FORM 111: LETTER OF INTENT FOR APPOINTMENT RENEWAL

Date: _____

For: _____
Dean/Director

Attention: _____ **Department Chair/Program Director**

From: _____
Signature of Instructor/Professor/ASF over Printed Name

Full-time Probationary Full-time Permanent
 Full-time Fixed Part-time
Status

Department

Subject: **Letter of Intent for Appointment Renewal**

Upon invitation of the Dean/Director of the College/Department of _____, I would like to inform all concerned that I:

intend to renew my appointment as a/the Faculty Member/ Chair/Program Director/Coordinator/
 ASF in this College/Department for the (1st) (2nd) (3rd) semester/term of SY _____ - _____.

do not intend to renew my appointment as a/the Faculty Member/ /Chair/Program Director/
Coordinator/ ASF in this College/Department for (1st) (2nd) (3rd) semester/term of SY _____ - _____ for the
following reasons:

_____.

Thank you very much.

cc: Faculty Member/ASF Concerned, Department Chair/Program Director Concerned, File