

Rutgers Health Faculty Search Completion Form (Updated July 2025)

This form is to be used for all faculty appointments of 0.5 FTE or greater on all tracks and 0.8 FTE or greater in RSDM.

	Date:
1.	Name of Person Completing the Form:
2.	Candidate Name and Degrees:
3.	Rank, Title (if applicable) and Track:
4.	School/Institute/Center:
5.	Department/Division:
6.	Are you considering/proposing a joint appointment? If so, with what school/department? Yes NO If yes:
7.	Date Position was Posted:
8.	ROCS Posting Number:
9.	Was your search committee charged and trained on the Rutgers Health Search Committee training? YES NO
10	. Date of training:
11.	. Describe the training, including who delivered the training
12	. Are you requesting a Rutgers Health Search Waiver? YES NO If yes, please skip to page 7 to submit justification.



<u>Mission Support Funding Request</u> (skip if there is no funding request):

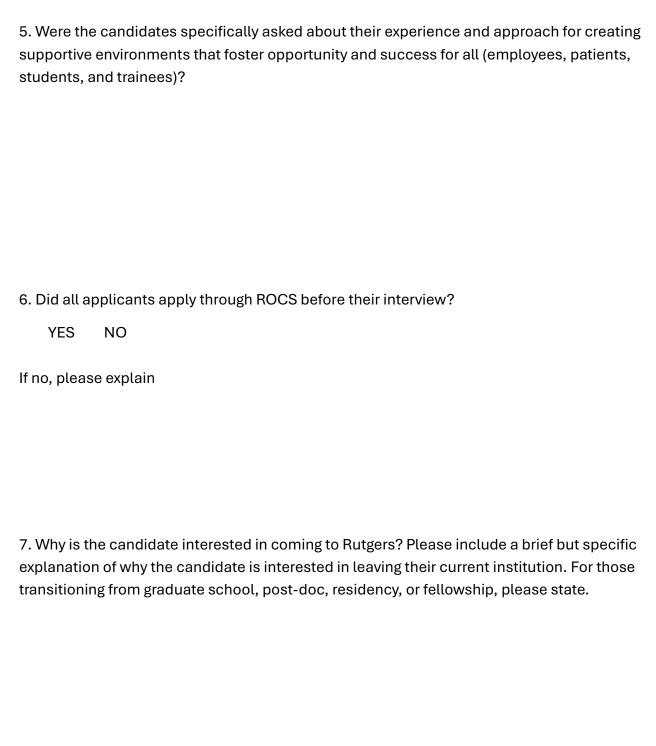
	Excellence or Other Area of Research Focus (select only one):					
☐ Cardiovascular		□ Internal Medicine*	☐ Clinical and			
□ Neuroscience		□ Surgery*	Translational Research			
□ Cancer		☐ Pediatrics*	☐ Organization of Health Care Delivery			
2.	e. If the appointment is outside of a medical school, which medical school is the secondary appointment? □ NJMS □ RWJMS					
3.	Please provide Division and I	Department (required):				
4.	In a short paragraph, explair	n how this meets the criteria for th	ne area identified above:			
5.	What lab (wet or dry)/animal candidate?	/office/program needs space has	s been identified for this			



Date	Outlet
If yes, atta	ach ads and complete:
YES	NO
4. Were ac	ds placed in outlets besides ROCS? (ROCS automatically posts on HERC, Indeed m)
3. Please	summarize the search process including dates the committee met:
2. How ma	any of the candidates applied because of direct outreach by the department or mmittee?
_	and considered?
 What si 	pecific steps were taken to ensure a broad range of qualified candidates were

Date	Outlet	







8. Please include a brief explanation of why this candidate was selected. Please explain any anomalies in the CV; for example, many job changes or gaps in employment.
9. If there are any special considerations or concerns about the search, please explain. For example, if the candidate was interviewed more than three months prior to offer, or there are less than 3 candidates interviewed or no candidates from outside the region:
Search Committee
Committee Chair: Name, Rank, Administrative Title (if applicable), Department, School:
Members: Name, Rank, Administrative Title (if applicable), Department, School:
1
2
3.
·· <u></u>



Candidate Pool

10. How many applications were received for this position?				

11. Candidates interviewed (include selected candidate):

Name	Current Institution (Include State, Country)	Interview Date(s)	Reason for Non-Selection (If the candidate turned down the position, please indicate the reason why)



Rutgers Health Search Waiver Request and Justification: please provide as much detail as possible – use an additional page if necessary.