

APPENDIX EE Partnership Program Institutional Approval Form

Faculty member,	, with TnCIS. Per TBR guidelines, all stitution of the applicant/proposer. All supporting m and should be reviewed by the appropriate application or program proposed. Please contact		
The following supporting documents must be reviewed: 1. Email notification of online faculty application submission 2. Faculty CV (short form) 3. Proposed course syllabus Signatures below indicate that the documentation has been reviewed and approved for support by the proposer's home institution. Signatures also indicate that the faculty member is SACSCOC qualified to teach the proposed course at			
		Name of TnCIS Member Institution	
		Approval by appropriate campus supervisor(s)	Printed Name
Signature	Date		
Approval by Dean (if applicable):			
, , , , , , , , , , , , , , , , , , ,	Printed Name		
Signature	Date		
Approval by CAO:			
	Printed Name		
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Approval by President:	Printed Name		
Signature	Date		
Approval by TnCIS campus representative:			
	Printed Name		
Signature	 Date		

IMPORTANT: After all signatures are received, please email *only* this completed form to TnCIS at tncis@pstcc.edu. Do not email any other supporting documentation. Electronic versions of all documents have already been received through the online application process.