



## Emeritus Faculty Request for University Resource Access

**Considerations:**

- Emeritus faculty must have [conferred status](#) by the University of Georgia prior to making a request for resource access.
- Emeritus faculty with ongoing service to the College or University may require access to university resources to fulfill such commitments.
- Requests will be considered on an individual basis, with access granted at the discretion of the Dean.
- The emeritus faculty member must adhere to all college and university policies and procedures relevant to the resource access granted (e.g., inventory process, equipment maintenance) and will relinquish the resource upon conclusion of the agreement.

**Process:**

- Following the College’s transmission of the [Recommendation for Award of Emeritus Status](#) to the Office of Faculty Affairs, the incumbent emeritus faculty member may submit this resource access request.
- If granted, resource access will be for a defined time period, not to exceed 12 months, to align with the faculty member’s specific service role (e.g., conclusion of the grant period, graduation of a doctoral student). However, the request may be renewed as new elements of service to the college or university are undertaken by the emeritus faculty member.

**Emeritus Faculty Name** \_\_\_\_\_ **Department/Unit** \_\_\_\_\_

In the event that Emeritus Faculty Member cannot personally return the resources granted, please designate a responsible party to ensure materials are returned to the University.

**Responsible Party:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

Service Role	Resource(s) Requested	Dates for Access (not to exceed 12 months)
<i>EXAMPLE: PI for xxxxx grant</i>	<i>-Research laboratory space (current allocation) -Laptop computer</i>	<i>Jan 2020-Dec 2020</i>

Emeritus Faculty Signature / Date \_\_\_\_\_

*I have reviewed this request and attest that it aligns with the mission of the College or University.*

Department Head Signature / Date \_\_\_\_\_

Approval by Dean      Signature / Date \_\_\_\_\_

**NOTES:**

Once approval is obtained, please include tag numbers for any issued equipment in the notes section.