This report must be submitted to the Affirmative Action Officer immediately after the preliminary Meeting(s) of the search committee.

Position_____________________________________                      Date_________
Department_________________________  Date of Interviews _____, _____, ____

1. Members of the Search Committee:
   A.______________________________________ E.______________________
   B.______________________________________ F.______________________
   C.______________________________________ G.______________________
   D.______________________________________ H.______________________

2. Were any protected class applicants identified in the application review process? Yes______ No________

3. Were any protected class applicants screened out by the review of Minimum Qualifications?  Yes _______ No_______ If yes, who?_________________

4. Were any protected class applicants deemed qualified but not selected for interview?    Yes________ No_______ If yes, who?____________________

5. Were the questions prepared in advance?  Yes_______  No_______

6. Were you given the opportunity to review the questions and have input into them?  Yes________  No_______

7. Were the questions unbiased and related to the performance of the duties and responsibilities of the position?  Yes________  No_________

8. Has a Rating Form and/or system been developed that will be used for all candidates?  Yes______________   No___________

9. Is there any exercise or work sample used as part of the selection process?  Yes_____  No_______ If yes, is the process demonstrably job related and objective?  Yes_______  No_______

Comments:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Signature of AA Representative or Search Committee Chairperson:
________________________________________________________________________
( Use additional sheets if necessary)