



**CYPRUS AYDIN UNIVERSITY
ACADEMIC PERSONNEL INTERVIEW
FORM**

CANDIDATE INFORMATION

Full Name:		Title:	
Nationality: TC <input type="checkbox"/> TRNC <input type="checkbox"/> FOREIGN <input type="checkbox"/>	Age:	Phone Number:	
Department / Major:		Number of Full-Time Faculty:	
Department / Major:	Position Announcement: Available Not Available		
Reference:	Email:		
Department / Major:	<input type="checkbox"/> Positive	<input type="checkbox"/> Negative	<input type="checkbox"/> No Vacancy / No Need
Dean / School Director:	<input type="checkbox"/> Positive	<input type="checkbox"/> Negative	<input type="checkbox"/> No Vacancy / No Need

FIRST INTERVIEW

Date: / /

Number of Days	Number of Course Hours (Teaching Load)	Commencement / Start Date
Salary Expectation (Net):	Salary Expectation (Gross / Net):	
Courses the Candidate Can Deliver / Teach:		
Description / Remarks:		



RECTOR INTERVIEW			Date:...../...../.....
Opinion:	Positive <input type="checkbox"/>	Negative <input type="checkbox"/>	No need <input type="checkbox"/>
Signature:			
BOARD OF TRUSTEES INTERVIEW			Date:...../...../.....
Opinion:	Positive <input type="checkbox"/>	Negative <input type="checkbox"/>	No need <input type="checkbox"/>
Signature:			