| *Record of Interviews* |
| --- |
| First Round [ ]  Second Round [ ]  |
| **JVN #** |  |  |
| **Position** |  |

Please indicate the names of the individuals who met the cut-off score who were invited to interview. This list must be reviewed by the Office of Equity, Inclusion, and Belonging before an offer is made to the proposed candidate(s), and upon approval you will be able to proceed with the final offer. Indicate in the third column below the committee’s job related rationale for recommendation/non-recommendation.

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| **Name***If recommended indicate recommended* | **Interview Date** | **Strengths/Weaknesses** |
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| Search Committee Members/Interviewers:*include anyone present at the interview* |  | CDO Approval |
| Chair:  |  |  |
| Incl. Rep.:  |  | Signature |
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|  |  | Date |
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