

SUB-DELEGATION OF AUTHORITY LETTER

By means of this letter, I, Dr. Elizabeth Cannon, President of the University of Calgary, delegate the authority herein described to the Provost and Vice President (Academic), on the following terms and conditions:

1. The Provost and Vice-President (Academic) may approve the following on my behalf:

Appointments/Reappointments of academic staff,	Can further	
specifically:	delegate?	
Continuing - Initial Term and with Tenure	No	
Contingent Term	No	
Limited Term	No	
Term Certain (Sessional), excluding Foreign Worker	Yes	
Term Certain – for Foreign Worker	No	
Faculty Professor	No	
Administrative – below level of Dean	No	
Joint – as part of Initial Appointment	No	
Joint Appointment - internal to a faculty	Yes	
Joint – external to the faculty, within the University	No	
Joint – external to the University	No	
Adjunct	Yes	
Clinical	Yes	
Honorary	No	
Chair / Fellowship	No	
Transfer between ranks	No	
Extension of term appointment (duration)	No	
Secondment	No	

ange to the term or conditions of an existing appointment, specifically:		
Renewal	No	
Deferrals (Provost, Dean, Parental, Personal)	No	
Granting of Appointment with Tenure	No	
Market Supplement and other remuneration change	No	
Change to FTE	No	
Transfer between Departments and Faculties	No	
Removal of Contingency	No	
Overload Teaching	Yes	
Memorandum of Agreement (MOA) with Faculty Association	No	

Leaves for academic staff, specifically:	
Administrative Leave for a Dean	No
Administrative Leave below Dean	Yes
Parental Leave	Yes
All Leaves in Section 18 of the Collective Agreement except	No
for Parental Leaves	

Research and Scholarship Leave	Yes
Research and Scholarship Leave Report	Yes

Resignations/Retirements of academic staff, specifically:		
Resignation	No	
Reduced Duties Leading to Retirement	No	
Retirement	No	

- The approvals subject to this delegation are those which are the subject of the President's delegation at Section C, Item 13 of the Delegation of Authority Table (effective December 9, 2010).
- 3. The effective date of this delegation is February 7th, 2012 and shall run until revoked by the President.
- 4. The authority delegated in this document shall not be sub-delegated except as indicated in the table in section 1 above.
- 5. This delegation is made pursuant to the Delegation of Authority Policy and is subject thereto.

Approved:		_	
Approved:(signature of delegation	ing official)	(signat	ture of VP if required)
Name of Delegating Official: _		Name:	
	(please type or print)	·	
Title of Delegating Official:			
	(please type or print)		
Date:		Date:	
	(please type or print)		
Acknowledged and Agreed: _			
	(signature of delegate)		
Name of Delegate:			
	(please type or print)		
Title of Delegate:			
	(please type or print)		
Date:			

NOTE: The appropriate Vice-President must also approve the sub-delegation if the delegating official is subordinate to the Vice-President.

cc: General Counsel (copy to be transmitted within two business days of execution).