**Named Chairs and Professorships:**

**Supplement to a Guide to the Appointment Approval Process**

The purpose of this document is to provide templates for committee tables and letters of (re)appointment in a format that easily allows for copying. Please see the accompanying Named Chairs and Professorships: A Guide to the Appointment Approval Process for related guidelines and instructions

For questions related to this guide, please contact the Office of the Vice-Provost, Relations with Health Care Institutions (VP-RHCI) at [medicine.namedchairs@utoronto.ca](mailto:medicine.namedchairs@utoronto.ca).

Table 2. Hospital-University Named Chair/Professorship committees

|  |  |  |
| --- | --- | --- |
| Committee Role | Name | Title / Academic Rank and Department |
| Chair (must have U of T faculty appointment) |  |  |
| Dean’s delegate/relevant U of T Dept. Chair |  |  |
| Hospital representative(s) |  |  |
| University representative(s) |  |  |
| Additional members (please specify role) |  |  |

Table 3. University Named Chair/Professorship committees

|  |  |  |  |
| --- | --- | --- | --- |
| Committee Role | Name | Academic Rank | University Department |
| Dept. Chair as committee Chair[[1]](#footnote-2) |  |  |  |
| Vice-Dean, Research and Innovation or other delegate as the Dean’s representative |  |  |  |
| Senior faculty member |  |  |  |
| Senior faculty member |  |  |  |
| Senior faculty member |  |  |  |
| Senior faculty member appointed to a different department |  |  |  |
| Additional members (please specify role) |  |  |  |

Appendix 1. Template Letter for Hospital-University Named Chairs/Professorships

**[DATE]**

**[APPOINTEE’S ADDRESS]**

Re: Appointment to the **[NAMED CHAIR]**

Dear **[NAME]**,

On the advice of the leadership of **[HOSPITAL]** and the University of Toronto and with the approval of the Vice Provost, Relations with Health Care Institutions, I write to offer you an appointment to the [**NAMED CHAIR**], a Hospital-University **[Named Chair/Limited Term Named Chair]** for a five-year term,[[2]](#footnote-3) beginning **[DATE]** and ending on **[DATE]**. This appointment is renewable for a second five-year term following a favourable review as per the Policy on Endowed and Limited Term Chairs, Professorships, Distinguished Scholars and Program Initiatives.[[3]](#footnote-4) **[Insert any relevant terms and conditions if specified in the Chair/Professorship agreement.]**

This appointment does not replace your current academic appointment at the University of Toronto, which remains governed by the relevant University policies and procedures.

As the Chair incumbent, you are required to submit an annual report of your teaching and research activities to the Chair of the Department where you hold your primary University appointment, the **[HOSPITAL NAME]** President and CEO (or delegate), and the **[HOSPITAL NAME]** Foundation. Also, in all publications, lectures, and any other activities supported through the Fund you will acknowledge that you hold the [**NAME OF CHAIR**], which is a joint project with the University and the Hospital.

I am delighted to offer you this prestigious appointment. Please sign below to indicate your acceptance and return a copy of this letter to my attention.

Yours sincerely,

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[**NAME OF SIGNING AUTHORITY]**

I accept the [**NAME OF CHAIR**] under the terms described above.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**[NAME OF CHAIR RECIPIENT] Date**

cc. **[CHAIR OF DEPT. WHERE CHAIRHOLDER HOLDS PRIMARY U OF T APPOINTMENT]**

Meg Connell, Director, Office of the Dean, Faculty of Medicine **[meg.connell@utoronto.ca]**

Jeremy Knight, Manager, Research Administration and Operations, Office of the Vice Dean Research and

International Relations **[jeremy.knight@utoronto.ca]**

Darina Landa, Executive Director, Office of Advancement, Faculty of Medicine**[darina.Landa@utoronto.ca]**

Johanne Provençal, Assistant Vice-Provost, Health Sciences Sector **[**[**medicine.namedchairs@utoronto.ca**](mailto:medicine.namedchairs@utoronto.ca)**]**

Appendix 2. Template Letter for University Named Chairs/Professorships

[**DATE]**

**[APPOINTEE’S ADDRESS]**

Re: Appointment to the [**NAMED CHAIR**] at the University of Toronto

Dear [**NAME]**,

Upon the advice of a special committee struck for this purpose and with the approval of the Vice-President and Provost and the Dean of Medicine, I write to offer you an appointment to the [**NAMED CHAIR**] **[a Named Chair/Limited Term Chair]** at the University of Toronto for a five-year term,[[4]](#footnote-5) beginning [**DATE**] and ending on **[DATE**]. This appointment is renewable for a second five-year term following a favourable review as per the Policy on Endowed and Limited Term Chairs, Professorships, Distinguished Scholars and Program Initiatives.[[5]](#footnote-6) **[Insert any relevant terms and conditions if specified in the Chair/Professorship agreement]**

This appointment does not replace your current academic appointment at the University of Toronto, which remains governed by the relevant University policies and procedures.

As the Chair incumbent, you are required to submit an annual report of your teaching and research activities to the Dean, Faculty of Medicine, the Chair of the Department in which you hold your primary University appointment, and the Faculty of Medicine Advancement office. Also, you will acknowledge in all publications, lectures, and any other activities supported through the Fund that you hold the [**NAME OF CHAIR**] at the University of Toronto.

I am delighted to offer you this prestigious appointment. Please sign below to indicate your acceptance and return a copy of this letter to my attention.

Yours sincerely,

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[**NAME OF SIGNING AUTHORITY**]

I accept the [**NAME OF CHAIR**] under the terms described above.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name Date

cc: **[CHAIR OF DEPT. WHERE CHAIRHOLDER HOLDS PRIMARY UNIVERSITY APPOINTMENT]**

Meg Connell, Director, Office of the Dean, Faculty of Medicine **[meg.connell@utoronto.ca]**

Jeremy Knight, Manager, Research Administration and Operations, Office of the Vice Dean Research and

International Relations **[jeremy.knight@utoronto.ca]**

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Johanne Provençal, Assistant Vice-Provost, Health Sciences Sector **[**[**medicine.namedchairs@utoronto.ca**](mailto:medicine.namedchairs@utoronto.ca)**]**

Gosia Urbanski, Business Officer, Faculty of Medicine **[gosia.urbanski@utoronto.ca]**

1. University Named Chairs/Professorships are usually situated in a particular department, in which case the Department Chair serves as committee Chair. When the Named Chair is not held in a particular department or if the Named Chair recipient is the Department Chair, either the Vice-Dean, Research and Innovation (VDRI) or the Dean generally serves as committee Chair. Please contact the Office of the VP-RCHI for additional information. [↑](#footnote-ref-2)
2. Three years in the case of Professorships. [↑](#footnote-ref-3)
3. For Limited Term Named Chairs add: “and depending on availability of funding.” [↑](#footnote-ref-4)
4. Three years in the case of Professorships. [↑](#footnote-ref-5)
5. For Limited Term Named Chairs add: “and depending on availability of funding.” [↑](#footnote-ref-6)