HARVARD T.H. CHAN | SCHOOL OF PUBLIC HEALTH
Office of Faculty Affairs

New Position Form
(For other academic appointments; research scientists, research associates, and visiting scientists only)

Department/Center_____

Title_____

Dates of Proposed Appointment: From:_____To: _____

Annual Salary (anticipated) _____

Is this a replacement for a prior position? Yes ☐ No ☐

If yes, name of prior appointee in this position

Please provide a brief description of the duties and responsibilities of this position.

How will this position be funded? (e.g., department training grant, Professor X's research grant, etc.)

Date _____ Submitted by _____

Please attach this document to the Wasabi new position transaction. For questions, please contact Lindsey Palmer at lpalmer@hsph.harvard.edu or Isin Ugur-Bastepe ugurbastepe@hsph.harvard.edu