Professor of the Practice
Enabling Legislation
Reasons for Modernizing Cornell’s Academic Titles

- Despite 2002 approval of Clinical Professor titles, Cornell remains woefully behind its peers in terms of having a competitive set of academic titles.
- This deficiency has four serious and demonstrable negative impacts:
  - Non-competitive in hiring specialized faculty
  - Tenure track hiring for dual career couples
  - Special diversity considerations
  - Impairment of tenure standards
Professor of the Practice Title

- Amend 2002 Clinical Professor legislation to allow alternate nomenclature
- Professor of Practice title used by most of our peers (Harvard, Yale, Columbia, Penn, Chicago, MIT, Duke, Hopkins, Virginia, University of California …)
- Others use Teaching Professor, Professor in the Field
- Legislation retains unit specific approval processes and percentage caps of Clinical Professor legislation
- Allows units that have approved Clinical Professor titles to migrate to alternate nomenclature if appropriate
“The title of Professor of the Practice is available only for long term, non-tenure-track faculty who are distinguished and highly experienced individuals in a relevant field of professional practice and who can provide effective, practice oriented instruction in areas that supplement the core pedagogical instruction provided by the tenured and tenure track faculty. While faculty of this rank may, depending on specific requirements of the college or school, have some additional research, service, or outreach obligations, teaching will be their primary responsibility. The title may not be used for positions whose responsibilities largely replicate those of tenure-track faculty.”
Use Limitations

“The title of Professor of the Practice is available only for long term, non-tenure-track faculty who are distinguished and highly experienced individuals in a relevant field of professional practice and who can provide effective, practice oriented instruction in areas that supplement the core pedagogical instruction provided by the tenured and tenure track faculty. While faculty of this rank may, depending on specific requirements of the college or school, have some additional research, service, or outreach obligations, teaching will be their primary responsibility. The title may not be used for positions whose responsibilities largely replicate those of tenure-track faculty.”
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Professor of the Practice
Enabling Legislation

- Proposal is supported by all Colleges and Schools and by AFPS
Committee on Academic Freedom
And Professional Status of the Faculty

Elizabeth Adkins Regan (Chair)
Sandra Greene (A&S)
Patricia Johnson (CALS)
Ronald Kline (Eng)
Suzanne Mettler (A&S)
Stephen Morgan (A&S)
Peter Stein (A&S)
Susan Suarez (Vet)
Sharon Tennyson (HumEc)
Joseph Burns (ex officio) (Eng)
Michael Fontaine (ex officio) (A&S)
Committee on Academic Freedom And Professional Status of the Faculty

• Met three times to discuss the proposed title and draft enabling legislation

• Interviewed people to hear arguments for and against

• Compared duties and benefits of the Clinical Professor and proposed Professor of the Practice title with existing tenure track and non-tenure track titles

• Reached a consensus of support for the proposed resolution
Committee on Academic Freedom And Professional Status of the Faculty

Arguments in favor:

• “Clinical” makes no sense for some colleges; an amendment to the Clinical Professor enabling legislation would fix that

• Thus solving some problems that hamper competitiveness

• The appropriate safeguards are already in place in the Clinical Professor enabling legislation
Arguments against:

- Risks encouraging increased reliance on non-tenure track instructors to teach our students
- Continues dilution of the meaning of “professor” and of Cornell’s model of professors as researcher-teachers
- Risks eroding the all-important academic freedom for teachers/professors that tenure provides
On balance, CAFPS thought benefits outweighed negatives given that:

- The core concept was already debated and decided upon in 2002
- Only the nomenclature is being amended, by providing an alternative title
- Additional language narrowly defines the role of Professor of the Practice
- The ground rules for the title remain the same as for Clinical Professor
Committee on Academic Freedom And Professional Status of the Faculty

• Whereas the 2002 enabling legislation that created the Clinical Professor titles was an effective first step in modernizing Cornell’s titles for non-tenure-track faculty engaged heavily or exclusively in a primary teaching function, and

• Whereas Cornell could further benefit from the addition of the Professor of the Practice titles in common use at peer institutions, and

• Whereas the need for and value of these new titles are widely recognized across campus, and

• Whereas the 2002 enabling legislation, including its various process and approval requirements, provides an appropriate framework for the implementation of the Professor of the Practice titles as alternatives to the Clinical Professor titles,

BE IT RESOLVED THAT THIS ENABLING LEGISLATION BE ADOPTED.
Enabling Legislation for the Professor of the Practice Title

April 2, 2014

I. Preamble

In 2002, the Faculty Senate approved enabling legislation that authorized the creation of new, non-tenure-track Clinical Professor titles. This action was in response to the fact that Cornell, in sharp contrast to its peers, lacked any professorial titles for those holding academic appointments that were focused heavily or exclusively on a primary teaching function. The Senate concluded that the lack of such titles put the University at a competitive disadvantage in terms of recruiting and retaining such faculty members and that the addition of new, non-tenure-track titles was necessary in order to provide “suitable acknowledgment of their status, qualifications, and activities or opportunity for career development.” (Enabling Legislation for Clinical Professor Title, April 29, 2002, attached).

At the time of the Senate’s approval of the Clinical Professor title, our peers used a number of titles describing non-tenure-track faculty who performed a primary teaching function. In addition to the Clinical Professor title, these included titles such as Teaching Professor, Professor in the Field, and most commonly, Professor of the Practice.
The Senate’s selection of the Clinical Professor nomenclature reflected the fact that the original proposal for this title came from the College of Veterinary Medicine, which was seeking to use it for non-tenure-track faculty who taught the actual practice of veterinary medicine in the live animal clinics of the Department of Clinical Sciences and the Cornell University Hospital for Animals. Following the passage of the enabling legislation, the Law School was the first unit to adopt the new title, in recognition that it already had similar non-tenure-track faculty teaching in its live client legal aid clinics. Recently, the Johnson School and the School of Hotel Administration have completed the approval process set forth in the enabling legislation.

Although the 2002 enabling legislation represented an important step in modernizing Cornell’s academic titles, the choice of the Clinical Professor titles as the sole authorized designation for non-tenure-track faculty engaged heavily or exclusively in a primary teaching function has proven too limited for a number of units on campus. The title works well in the Vet College context, but in the Law School it has been awkwardly stretched to cover both those instructors who actually teach in clinical settings but also a separate group, known internally as the Lawyering faculty, who teach basic practice skills to first year students in a classroom setting. The fit is considerably worse in the Johnson School and the Hotel School, who employ the title to cover faculty teaching basic business practice skills, even though these are not tied to anything resembling a clinical setting. Finally, colleges like Architecture, Art and Planning, while in need of a better title to describe the faculty teaching at the practice-oriented end of the spectrum, find the Clinical Professor titles to be odd and ill fitting within the norms of their disciplines.
Most of our peers have typically solved this nomenclature issue by providing concurrently for both the Clinical Professor and Professor of the Practice titles. This enabling legislation seeks to do the same. However, rather than create such titles independent of existing authorizations, the Committee on Academic Freedom and Professional Status of Faculty instead proposes simply to amend the existing Clinical Professor legislation to allow the use, at a unit’s option, of the Professor of the Practice title as an alternate designation. This approach represents the Committee’s conclusion that both titles refer to essentially the same general kind of instructional faculty, and that the need for an alternate nomenclature merely reflects the different prevailing norms in different schools and colleges.

• Whereas the 2002 enabling legislation that created the Clinical Professor titles was an effective first step in modernizing Cornell’s titles for non-tenure-track faculty engaged heavily or exclusively in a primary teaching function, and
• Whereas Cornell could further benefit from the addition of the Professor of the Practice titles in common use at peer institutions, and
• Whereas the need for and value of these new titles are widely recognized across campus, and
• Whereas the 2002 enabling legislation, including its various process and approval requirements, provides an appropriate framework for the implementation of the Professor of the Practice titles as alternatives to the Clinical Professor titles,

BE IT RESOLVED THAT THIS ENABLING LEGISLATION BE ADOPTED.
II. Amendment of Enabling Legislation
The purpose of this legislation is to amend the 2002 Enabling Legislation for the Clinical Professor Title to allow units, at their option, but in accordance with the process and requirements of the 2002 Clinical Professor legislation, to use the alternate title of Professor of the Practice in reference to a limited and defined group of long-term, non-tenure-track appointments. This title will be available for use at the Assistant, Associate and Full Professor rank, modifiable by the terms "acting," "adjunct," "courtesy," and "visiting."

III. Limited Availability of Professor of the Practice title.

The title of Professor of the Practice is available only for long term, non-tenure-track faculty who are distinguished and highly experienced individuals in a relevant field of professional practice and who can provide effective, practice oriented instruction in areas that supplement the core pedagogical instruction provided by the tenured and tenure track faculty. While faculty of this rank may, depending on specific requirements of the college or school, have some additional research, service, or outreach obligations, teaching will be their primary responsibility. The title may not be used for positions whose responsibilities largely replicate those of tenure-track faculty.
IV. Proposal Process
A college or school that wishes to adopt the Professor of the Practice title shall employ the full set procedures and approvals, and shall be subject to the same constraints, as set forth in the 2002 Enabling Legislation for the Clinical Professor Titles (attached).

Units that wish to use both the Clinical Professor and Professor of the Practice titles to designate different subsets of faculty shall describe in detail in their proposal the roles and domains pertaining to each title. In such cases, the combined number of faculty bearing such titles shall not exceed the percentages set forth in Section VI.D. of the 2002 Enabling Legislation for the Clinical Professor Titles.

Units that have already adopted the Clinical Professor titles but wish instead to use the Professor of the Practice designation for either all such faculty or a defined portion of such faculty shall submit a proposal to do so to the Committee on Academic Policies and Procedures (CAPP) for review for conformity to the requirements of this enabling legislation. CAPP shall report its approval of any nomenclature change to the University faculty.
Trustee adoption of this proposal will require modification of University Bylaws as follows:

ARTICLE XIII: COLLEGE AND SCHOOL FACULTIES
Add "professors of the practice, associate professors of the practice, and assistant professors of the practice" where appropriate, and make them contingent voters along with clinical professors, associate clinical professors, assistant clinical professors, lecturers and senior lecturers.

ARTICLE XVI: THE INSTRUCTIONAL AND RESEARCH STAFF
Add "professors of the practice, associate professors of the practice, and assistant professors of the practice" in section 1 and amend section 2.d to read

d. Senior scholar, senior scientist, senior research associate, senior extension associate, senior lecturer, full, associate, and assistant clinical professor, and full, associate and assistant professor of the practice shall be appointed by the President for a term of not to exceed five years, renewable indefinitely.
Enabling Legislation
for the Clinical Professor Title

May 29, 2002

* vers. 1.4, with modifications adopted by the Task Force in the wake of May 3 Senate meeting:
  • ¶s 2 and 3 of previous Preamble deleted, per vote of Senate;
  • Provision for modifiers "acting," "adjunct," "courtesy," and "visiting" deleted from II;
  • Wording of IV.B further modified for clarity;
  • Version of a pending amendment to VI.D appended as Appendix B.
I. Preamble

The current range of available academic titles does not meet the needs of various Colleges at Cornell that stand to benefit considerably from the creation of a new, primarily single-function, non-tenure-track Clinical Professor title. These Colleges are currently experiencing difficulty both in recruiting and retaining faculty members who might bear such a title since, unlike many of their peer institutions, they have only the title of Lecturer or Senior Lecturer available. In addition, there are currently individuals in Lecturer positions who are, in effect, carrying out the functions of Clinical Professors without suitable acknowledgment of their status, qualifications, and activities or opportunity for career development.

• Whereas an inadequacy in the current range of available academic titles makes it desirable to create a new non-tenure-track Clinical Professorial Title, and
• Whereas it is clearly important to recognize and reward the status, qualifications, and activities of those faculty members for whom such a title would be appropriate, and
• Whereas units need to improve recruitment and retention of such faculty-members, and
• Whereas, where appropriate and possible, units should be able to reclassify competitive candidates who are currently doing such work de facto, while employed as Lecturers or Senior Lecturers,

BE IT RESOLVED THAT THIS ENABLING LEGISLATION BE ADOPTED.
II. Purpose of Enabling Legislation
The purpose of this legislation is to enable individual colleges and schools, in accordance with the process and requirements described below, to use the title of Clinical Professor in reference to a limited and defined group of long-term, non-tenure-track appointments. This title will be available for use at the Assistant, Associate and Full Clinical Professor rank.

III. Limited Availability of Clinical Professor Title.
The title of Clinical Professor is available only for long term, non-tenure-track faculty who serve an essential teaching function in a clinical setting. While faculty of this rank may, depending on specific requirements of the college or school, have additional research, service, or outreach obligations, teaching will be their primary responsibility. The title may not be used for positions whose responsibilities largely replicate those of tenure-track faculty. Similarly, the title is not meant as a wholesale replacement for the titles of faculty now employed as Lecturers or Senior Lecturers.
IV. Proposal Process
A college that wishes to use the title of Clinical Professor must take the following steps: A. Sponsors must prepare a written proposal for use of the title in accordance with the requirements of sections V and VI, below.

B. The proposal must be approved by at least two-thirds of those voting, in person or by ballot, in each of two separate votes, of tenure-track and of non-tenure-track faculty of the originating college or school (as defined under Article XIII of the University Bylaws), respectively. Further, for the proposal to be approved, at least half of all those faculty members eligible to vote in each case must vote for it.

C. A proposal so approved will come before the University Committee on Academic Policies and Procedures (CAPP) for review of its conformity to the requirements of section V and VI, below. After submission to CAPP, such a proposal will be distributed to University faculty and distributed to or electronically posted for other interested parties for a period of 60 days before action by CAPP in order to invite public comment.

D. At the end of the comment period, CAPP shall review the proposal in order to determine whether it complies with the requirements of this enabling legislation. In conducting such a review, the committee is not to substitute its judgment for that of the originating college or school as to the need for or wisdom of the college’s or school’s adoption of the Clinical Professor title.
E. If CAPP determines that the proposal meets the requirements of this enabling legislation, it will report the proposal to the Senate, which will approve or deny the proposal by a majority vote based on the Senate’s determination of whether the proposal complies with the requirements of this legislation. If CAPP determines that the proposal fails to meet the requirements of this legislation, it shall furnish a written explanation of this determination to the college or school submitting the proposal.

V. Proposal Contents
The written proposal of a college or school that seeks to use the title of Clinical Professor must include the following provisions.

A. Justification. A proposal for adoption of the Clinical Professor title shall include a statement offering justification for adoption of the title within the originating college or school and explaining why existing titles for non-tenure-track faculty are insufficient for staffing and recruitment. The practices of peer schools and the impact of available titles on recruitment efforts may be of particular relevance in this regard.

B. Description of Position. The proposal shall describe as precisely as possible the functions and responsibilities of positions bearing the title and the anticipated distribution of such positions within the college or school.
C. Terms of Appointment. The proposal shall include a summary of the terms on which candidates will be appointed and reappointed to such positions and promoted from one to another. These terms should include: the nature of the search by which applications will be elicited; the credentials required by holders of these positions; the levels (department, college, university) at which approval for individual appointments is necessary; the length of appointments; the possibilities open to appointees for movement between non-tenure-track and tenure-track paths; and procedures for renewal and promotion open to appointees.

D. Percentage Limitation. The proposal shall include a statement restricting the creation of positions in the proposed titles to a certain percentage of the tenure-track faculty of the originating college and of the tenure-track faculty in those departments or programs where those positions are located.

E. Voting and Other Rights. The proposal shall define the rights and responsibilities of appointees in the proposed titles, including their voting status in their departments and colleges or schools, and their access to grievance and appeals processes available to tenure-track faculty.

F. Impact Statement. The proposal shall contain an appraisal of the impact of creating the new positions on existing tenure-track and non-tenure-track academic titles and their holders. This appraisal should indicate whether and in what ways current holders of non-tenure-track titles will be eligible for appointment to the new positions and whether their current positions will be protected against elimination by the new positions.
VI. Additional Restrictions on the Use of the Clinical Professor Title.

In addition to satisfying the provisions of section V, all proposals for the use of such titles must satisfy the following requirements:

A. The functions of positions bearing Clinical Professorial titles may not replicate the full array of functions (e.g. teaching and research and service or outreach) served by tenure-track positions in the originating college or school. Proposals must indicate how the functions of positions as defined will differ from regular tenure-track positions.

B. Terms of positions bearing these titles shall normally be for three to five years and shall not exceed five years. Unless otherwise specified, they shall be renewable indefinitely. Holders of these titles whose appointments are not renewed must receive a full year's appointment from date of notice of non-renewal.

C. Procedures for review, renewal and promotion of holders of these titles shall be comparable in rigor to those in tenure-bearing positions. Appointment of faculty of this rank shall normally be the result of a national search.
D. The percentage of positions bearing the titles may not exceed 25% of the existing tenure-track faculty positions in the college or 25% of the tenure-track positions in those departments or programs where those positions are located.

E. Except by appointment of the holder to a new position bearing one of these titles or by resignation of the holder, no non-tenure-track faculty position may be eliminated solely as a result of creating such a new position for a function comparable to that filled by the old position.

BE IT FURTHER RESOLVED THAT

VII. Committee to Investigate the Status of Non-Tenure-Track Faculty

A. The Faculty Senate directs the Dean of the Faculty to appoint a Task Force or task forces to investigate the status and conditions of employment of non-tenure-track faculty including their terms of employment, particularly job security, rights to academic freedom, access to appropriate grievance and appeals procedures, eligibility for sabbatic leave, eligibility for emeritus/a status, and voting rights.

B. The Senate is mindful that the Dean of the Faculty may determine that the present Task Force on Professorial Titles should continue to work on the issue of titles.

C. Any body or bodies appointed to study these issues will report to the Senate on the progress reached no later than the second Senate meeting of the Spring of 2003, but may report earlier, if any specific proposals are ready for action.
Appendix A

Trustee adoption of this proposal will require modification of University Bylaws as follows:

ARTICLE XIII: COLLEGE AND SCHOOL FACULTIES
Add "clinical professors, associate clinical professors, and assistant clinical professors" where appropriate, and make them contingent voters along with lecturers and senior lecturers.

ARTICLE XVI: THE INSTRUCTIONAL AND RESEARCH STAFF

Add "clinical professors, associate clinical professors, and assistant clinical professors" in section 1 and amend section 2.d to read

d. Senior scholar, senior scientist, senior research associate, senior extension associate, senior lecturer, and full, associate, and assistant clinical professor shall be appointed by the President for a term of not to exceed five years, renewable indefinitely.
Appendix B

a version of amendment to VI.D proposed by Steven Shiffrin and Risa Lieberwitz, 7 May.
additions underlined

D. The percentage of positions bearing the titles may not exceed 25% of the existing tenure-track faculty positions in the college or 25% of the tenure-track positions in those departments or programs where those positions are located, except as herein provided. A higher percentage may be afforded if, but only if, the relevant college, department, or program makes an overpowering showing that: (1) there is a need for the higher percentage; (2) the Clinical Professor positions in question would not replicate the functions of positions ordinarily held by tenured or tenure-track faculty; and (3) any additional Clinical Professor positions in a department or program would not detract in any way from the potential for adding tenured or tenure-track positions in that department or program.