

Requester's Name	Michael J. Miller	Requester's Title	Assistant Professor
Requester's Department	Department of Biology	Requester's Institution	University of Alaska
Requester's Address	1000 University Ave	Requester's Phone	907-475-1500
Requester's E-mail	miller@alaska.edu	Requester's Fax	
Requester's Mailing Address	1000 University Ave	Requester's City	Fairbanks
Requester's State	AK	Requester's Zip	99775

Requester's Title: Assistant Professor

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10. Number² of new TA or faculty hires anticipated (or number of positions eliminated if a

11. Number² of TAs or faculty to be reassigned:



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