



**KENNESAW STATE
UNIVERSITY**

DIVISION OF GLOBAL AFFAIRS
*Center for African and
African Diaspora Studies*

Center for Africana Studies Faculty Associate Interest Form

Name: _____

Faculty Rank: _____

Home Department: _____

Research Interests: _____

Teaching Interests: _____

Faculty Signature: _____ Date _____

Department Chair/School Director: _____ Date _____

Please return completed form to Nuru Akinyemi (nakinyem@kennesaw.edu).