

**DOCUMENTATION OF QUALIFICATIONS FOR A FULL-TIME
OR PART-TIME FACULTY APPOINTMENT**

Faculty Member's Name:

Status/Rank/Title:

Department/College:

Teaching Discipline:

Course Assignments or Level of Instruction:

Qualifications (check all that apply):

Undergraduate and Graduate degrees - List degrees _____

Related Work experience

Professional licensure and certifications

Honors and Awards

Continuous documented excellence in teaching

Other demonstrated competencies and achievements

Detailed description of qualifications (attach vita, copies of licenses, certificates, etc.):

APPROVALS:

Department Head's Signature _____ Date: _____

Dean's Signature _____ Date: _____

Provost's Signature _____ Date: _____