Last Name:

First Name:

Middle Name:

What is your employment status:  Full-time  Part-time

Campus Employee ID:

Division:

Department:

## List the courses levels for which this instructor is credentialed to teach:

*Credential Key:*

D: Developmental

UN: Undergraduate Nontransferable

UT: Undergraduate Transferable

LAB: Laboratory

G: Graduate

Course 1

Course Prefix:

Course Level:  D  UN  UT  LAB  G

Course 2

Course Prefix:

Course Level:  D  UN  UT  LAB  G

Course 3

Course Prefix:

Course Level:  D  UN  UT  LAB  G

Course 4

Course Prefix:

Course Level:  D  UN  UT  LAB  G

Course 5

Course Prefix:

Course Level:  D  UN  UT  LAB  G

Course 6

Course Prefix:

Course Level:  D  UN  UT  LAB  G

Course 7

Course Prefix:

Course Level:  D  UN  UT  LAB  G

Course 8

Course Prefix:

Course Level:  D  UN  UT  LAB  G

Course 9

Course Prefix:

Course Level:  D  UN  UT  LAB  G

Course 10

Course Prefix:

Course Level:  D  UN  UT  LAB  G

## Earned Degrees (Choose and fill in all that apply)

None

Certificate

Major*:*     

Institution*:*     

Diploma

Major*:*     

Institution*:*     

Associate

Major*:*     

Institution*:*

Bachelor

Major*:*     

Institution*:*     

Masters

Major*:*     

Institution*:*     

Ed. Specialist

Major*:*     

Institution*:*     

Doctorate

Major*:*     

Institution*:*

## Other Relevant College Credit

Course 1

Prefix and Number*:*     

Course Title*:*

Institution*:*     

Semester Credit Hours*:*

Course 2

Prefix and Number*:*     

Course Title*:*

Institution*:*     

Semester Credit Hours*:*

Course 3

Prefix and Number*:*     

Course Title*:*

Institution*:*     

Semester Credit Hours*:*

Course 4

Prefix and Number*:*     

Course Title*:*

Institution*:*     

Semester Credit Hours*:*

Course 5

Prefix and Number*:*     

Course Title*:*

Institution*:*     

Semester Credit Hours*:*

Course 6

Prefix and Number*:*     

Course Title*:*

Institution*:*     

Semester Credit Hours*:*

Course 7

Prefix and Number*:*     

Course Title*:*

Institution*:*     

Semester Credit Hours*:*

Course 8

Prefix and Number*:*     

Course Title*:*

Institution*:*     

Semester Credit Hours*:*

Course 9

Prefix and Number*:*     

Course Title*:*

Institution*:*     

Semester Credit Hours*:*

Course 10

Prefix and Number*:*     

Course Title*:*

Institution*:*     

Semester Credit Hours*:*

## Specialized Certification (attach copies):

## Work Experience Relevant to Teaching Discipline (documentation may be required):

Employer 1

Employer*:*     

Title*:*

Dates of Employment*:*     

Primary Responsibilities*:*

Employer 2

Employer*:*     

Title*:*

Dates of Employment*:*     

Primary Responsibilities*:*

## Professional Publications and Presentations:

## Continuing Education/Professional Development:

## Other Outstanding Professional Expertise and/or Demonstrated Contributions to the Teaching Discipline:

## Rationale for Teaching Assignment (provided by the division Dean):

Division Dean Date

Vice President for Academic Affairs Date