

Howard College - Faculty Credentials Evaluation Summary

PART I

Name: _____

Courses (Include Rubric, Number, & Course Title): _____

Full-time

Part-time

EDUCATION: List degree(s) in order earned

	Year	Major Field	Degree	Institution	Regionally Accredited	
1					<input type="checkbox"/> Yes	<input type="checkbox"/> No
2					<input type="checkbox"/> Yes	<input type="checkbox"/> No
3					<input type="checkbox"/> Yes	<input type="checkbox"/> No

Primary Teaching Field: _____

Number of Graduate Hours: _____

Secondary Teaching Field: _____

Number of Graduate Hours: _____

PART II

- Copy of transcript attached. Highlight all courses in teaching field considered to meet the criteria for faculty credentials.
- Official transcript on file in Human Resources. MUST NOT READ "ISSUED TO STUDENT."
- Official transcript not on file. Faculty has been informed to request and to submit official transcripts to Human Resources. Copy of memo attached.

PART III

- Transfer Courses** Meets Criteria: Yes No
- Master's degree in teaching field; or
- Master's degree and 18 graduate hours in teaching field; or
- *Meets criteria through justification.

- Occupational Courses** Meets Criteria: Yes No
- Master's degree in teaching field; or
- Bachelor's degree in teaching field; or
- Associate's degree in teaching field; or
- Certificate in the teaching field; or
- *Meets criteria through justification.

- Developmental Courses** Meets Criteria: Yes No
- Master's degree in teaching field; or
- Bachelor's degree in teaching field; or
- Bachelor's Degree in a related teaching field with college-level teaching experience in a related discipline and/or training in remedial education or adult learning competencies; or
- *Meets criteria through justification.

Deficient: Yes No

Faculty found with a deficiency during the review process will be informed in writing by the Executive Dean and an appropriate course of action will be determined to remove the deficiency. **If applicable, a credential deficiency plan is attached.**

***Must complete the Justification of Faculty Qualifications and/or the Course Crosswalk for Justification of Faculty Credentials. This must be approved and attached to this Faculty Credentials Evaluation Summary.**

Approval:

Dean

Date

Administrative Dean

Date

Chief Academic Officer

Date

SALARY SCHEDULE DEGREE + HOURS TO PAY: _____ Chief Academic Officer: _____

NOTES: