

Number: SCP 2171.A

Origination: September 1, 2000 Effective: December 9, 2004 Reviewed: September 28, 2007

Faculty Credentials Certification Form

Name:		Social Security Number:	Social Security Number:	
Campus/Division/Program:				
The following items are re	quired for the faculty member's po	ersonnel file.		
Required for Personnel File		Date Furnish	Date Furnished	
Application				
Resume/Vita				
Official Transcripts				
Department Chairpersons Courses for which this facul	/Dean to complete: ty member meets NCA credentialing Courses	requirements. Qualifications (Graduate H	ours. Training)	
Courses		Qualifications (Graduate II		
Degrees: Date Received	Granting Institution	Malan	Minor	
Date Received	Granting institution	Major	Willion	
	ormation to the best of my ability. In a uman Resources Office prior to his/h		loyee that all official	
Department Chair		Date		
Academic Dean		Date		
Vice President for Academic Affairs		Date		