**APPENDIX B**

**FACULTY HIRING AND CREDENTIALS**

The Department Chair submits this form on behalf of the faculty applicant, faculty member or GTA to the College Dean.

* For **faculty applicants/new hires**, complete SECTION I HIRING and SECTION II. COURSES CREDENTIALED TO TEACH.
* For **current faculty if teaching assignments change**, complete SECTION II. COURSES CREDENTIALED TO TEACH.
* For **GTAs teaching as instructor of record**, complete SECTION II. COURSES CREDENTIALED TO TEACH.
* For **GTAs teaching as secondary instructors**, complete SECTION III. GTA COURSE RESPONSIBILITIES.

Applicant/Faculty/GTA Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Discipline or Program: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SECTION I. HIRING (For new faculty hires)**

*Submit all supporting documents electronically with this form.*

**JOB REQUIREMENT AS ADVERTISED:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  | Minimum | Preferred | Comments |
|  |  |  |  |  |
| Education |  |  |  |  |
|  |  |  |  |  |
| Type(s) of Job Experience | 1 |  |  |  |
|  | 2 |  |  |  |
|  | 3 |  |  |  |
|  |  |  |  |  |
| Other Knowledge, Skills Or Characteristics |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**REQUIRED DOCUMENTATION:**

Biographical Sketch or Current Resume

Transcripts of all academic work, undergraduate and graduate.

Three Letters of Reference OR, if the applicant is a UAH graduate, Reference from Department Chair

Letter from the Department Chair on experience qualifications, if required

Other Pertinent Information as described below:

|  |
| --- |
|  |

**SECTION II. COURSES CREDENTIALED TO TEACH AS INSTRUCTOR OF RECORD (For new faculty hires, for current faculty if teaching responsibilities change, or for GTAs teaching as instructor of record)**

* *Indicate course number(s) or 4-digit CIP code for any courses that the faculty member is credentialed to teach for each applicable credential type. Please include ALL courses the faculty member can teach, even if the courses are not part of their typical load. Most faculty will have courses indicated for just one credential type.*
* *Ensure, for faculty teaching graduate courses, that they have graduate status. Include, for faculty teaching graduate courses and credentialed based on experience, the recommendation letter from the Graduate Dean.*
* *Submit any new or revised supporting documents electronically with this form.*

1. Based on a terminal degree or non-terminal master’s degree in discipline. (See I.D.1 in Faculty Credential Policy.)

|  |
| --- |
|  |

2. Based on a graduate degree (master’s or above) in another discipline PLUS 18 hours graduate level coursework in the discipline. (See I.D.2 in Faculty Credential Policy.)

|  |
| --- |
|  |

List below the specific, relevant 18 hours of coursework completed by the applicant/faculty/GTA.

|  |
| --- |
|  |

3. Based on experience in the discipline or related field, if required. (See I.D.3 in Faculty Credential Policy.) PROVOST APPROVAL REQUIRED.

|  |
| --- |
|  |

**SECTION III. GTA COURSE RESPONSIBILITIES (For GTAs teaching as secondary instructors at time of appointment or if teaching responsibilities change)**

*Please include all courses that the GTA is teaching or is likely to teach and the corresponding supervising faculty member for each course. Ensure that copies of transcripts are in the GTA file and available upon request.*

Supervising Faculty Member: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Course-related responsibilities including course number and expected tasks.

|  |
| --- |
|  |

**SECTION IV. APPROVALS**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Department Chair Approve Deny

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

College Dean Approve Deny

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Provost (if required per I.D.3 in the Faculty Credentials Policy). Approve Deny

*Please submit electronically with all supporting documents*

*to the Office of Institutional Research and Assessment at* [*oir@uah.edu*](file:///C:\Users\Provost\AppData\Local\Microsoft\Windows\Temporary%20Internet%20Files\Content.Outlook\ZAELR362\oir@uah.edu)*.*