#### **VERIFICATION OF FACULTY CREDENTIALS**

Verification of credentials is required for all faculty, including adjuncts and full-time fixed-term faculty regardless of the instructional delivery mode. This form must be submitted and approved before the faculty member is hired and before the faculty member provides instruction.

**INSTRUCTIONS:** Use this form to document academic credentials and other qualifications that attest to the faculty member's eligibility to teach the courses listed on this form. To document academic credentials, review the transcript of the highest degree earned by the faculty member and enter the required information. If non-academic qualifications are being used to justify the faculty member's eligibility, list that information in the appropriate area in Section 2.

If this form was completed when the faculty member was hired to teach in a previous academic term and there is no change in the faculty member's credentials and no change in the course the faculty member will teach, please indicate this by checking the appropriate box below. After completing the form, sign (digital signatures are allowed) and upload the form with the hiring documents for the next level of approval.

Submission of this form does not substitute for submitting the faculty member's official transcript to the Human Resources and the Office of Academic Affairs. It is recommended that the hiring unit keep a copy of the faculty member's transcript in the unit office.

REDENTIALED TO TEACH
Course Number and Course Name

- Check here for returning faculty only if ALL of the following statements are true.
- 1) This form was submitted when this faculty member was hired to teach at Arkansas Baptist College during a previous academic term and a copy of the completed form with approvals is on file.
- 2) There has been no change in the faculty member's credentials.
- 3) There has been no change in the courses this faculty member will teach during this contact period.

#### **VERIFICATION OF FACULTY CREDENTIALS**

#### **SECTION 1 - ACADMEMIC CREDENTIALS**

Highest Degree Earned	Discipline	Institution Awarding Degree	Year Awarded
	Specialty Area:		
Additional Graduate Degree Earned	Discipline	Institution Awarding Degree	Year Awarded
	Specialty Area:		

### COURSES (FROM HIGHEST DEGREE ATTAINED) RELEVANT TO TEACHING AREA

Course Number	Course Name	Credit Hours

### **VERIFICATION OF FACULTY CREDENTIALS**

### **SECTION 2 – OTHER QUALIFICATIONS**

SECTION 2 - OTTIEN	QUALII ICATIONO	,			
Complete this section to provide information about additional qualifications used to meet HLC credentials guidelines					
Professional Licensu	re and Certification	<u>ns</u>	1	•	
Licensure or Certification (full title)		G	ranting Organiz	zation/Agency	Effective Dates (from – to)
	<u> </u>				
Honors and Awards					
Honor or Award		Granting Organization/Agency		Date	
<b>Documented Excelle</b>	nce in Teaching or	r Othe	r Demonstrate	d Competenc	ies /Achievements
Activity			Date		

### **VERIFICATION OF FACULTY CREDENTIALS**

Course and Curricular Development		
Activity		Date
SECTION 3 - SIGNATURES OF APPROVAL		
Department Chair		
Division Head		
Office of Academic Affairs		

A signed copy of the Verification of Faculty Credentials form should be kept on file in the academic department and the Office of Academic Affairs in addition to the copy maintained in the file in Human Resources.