

TWU Faculty Qualifications Documentation Form
(To be inserted in faculty credential files)

Faculty Name:	Faculty Rank:
College/Department:	Status: full-time: part-time:
Expected Teaching Discipline:	Courses:

This sheet and appropriate matching documents must be completed for all faculty members.

Respond to each item below; write short summary statements about these qualifications below and attach documents for all that apply. Do not write “see vita” or “see transcript.”

1. Education: Number of graduate hours in the teaching discipline _____
2. Experience : Contribution to teaching in the discipline (number of years, courses taught):
3. Achievements: Publications, grants, licenses, and certificates in teaching discipline:
4. Achievements: Technical and performance competency in teaching discipline:
5. Achievements: Outstanding Professional experience related to teaching:
6. Other (Explain factors which might account for differences between terminal degree name and name of courses taught such as history or configuration of the teaching discipline):

		Documents attached:
Department Chair	Date	Vita/Resume:
Dean	Date	Transcript:
Associate VP Institutional Effectiveness	Date	License/Certification Other: