

## **Faculty Qualifications Assurance Form**

This form must be completed for the hiring of <u>all faculty</u> (regular and adjunct) who teach courses are/or are involved with development of curricula.

Faculty I	Name:	Position Title:
Home A	cademic Unit:	G Number:
Faculty	member will teach at the following course levels	(check all that apply):
	Bachelor's Master's	Doctoral
is qualifi		de all expected or anticipated courses): A faculty motion (X80) courses related to their qualifications a licated here.
Faculty r	member has the following Academic Credentials	(indicate Yes or No for each item):
$\sim$	Terminal degree related to the discipline or subf teach and/or develop curricula and/or supervise	· · · · · · · · · · · · · · · · · · ·
Master's degree related to the discipline or subfield of the discipline in which the person will teach and/or develop curricula and/or supervise scholarly activity		
	Bachelor's degree related to the discipline or subteach and/or develop curricula	ofield of the discipline in which the person will
	Nationally-recognized credential (certification, lie of the discipline in which the person will teach a scholarly activity	The state of the s
the cred	a summary of the faculty member's academic cr dentials are relevant to the course(s) that will be sed. Attach additional information if space provic	taught and/or the scholarly activity that will be

Y N	nuicate les of No for each item).
Hasyears of tested experience related to and/or the scholarly activity that will be supervision counted as experience obtained post-degree counted.	·
Is recognized by peers for distinguished profess expert in the content covered in the course(s) t that will be supervised.	•
Provide a detailed description of the person's tested ex is relevant to the course(s) that will be taught and/or that applicable). Attach additional information if space provides	e scholarly activity that will be supervised (if
I have verified that this candidate meets the GVSU Facult	ty Qualifications criteria based on the following
Academic credentials qualify the faculty member	
Academic credentials plus tested experience qualify the faculty member	
Not currently qualified but have an agreed-to pla	an to get qualified (please attach plan)
Faculty Name:	
Faculty Signature:	Date:
Unit Head Name:	
Unit Head Signature:	
Appointing Officer Name:	
Appointing Officer Signature:	Date: