



Faculty Qualifications Verification Summary

Name:

Social Security Number:

Division:

Department:

Position:

Status:

EDUCATION

Degree:

Degree Field:

Institution:

Degree:

Degree Field:

Institution:

Degree:

Degree Field:

Institution:

Licensures /Certifications

Certification:

Certification Source:

Valid Until:

Certification:

Certification Source:

Valid Until:

Certification:

Certification Source:

Valid Until:

Courses approved to teach:

Academic Dean

Date

Vice Chancellor for Academic Affairs

Date