



## Faculty Credential Action Plan

### Faculty Agreement

**TO: Executive Vice President and Chief Academic Officer**

I have evaluated the action plan of \_\_\_\_\_, faculty member in the Department of \_\_\_\_\_.

**Progress Report Date:**

**Anticipated Completion Date:**

**Brief Summary:** *(Attach supporting documents.)*

Signatures indicate agreement with the plan of action developed to bring the credentials of the above named faculty member in compliance with the established guidelines found in the *Del Mar College Guidelines and Standards for Documentation of Faculty Credentials*.

\_\_\_\_\_  
Faculty Member

\_\_\_\_\_  
Date

\_\_\_\_\_  
Department Chair

\_\_\_\_\_  
Date

\_\_\_\_\_  
Division Dean

\_\_\_\_\_  
Date

\_\_\_\_\_  
Executive Vice President and Chief Academic Officer

\_\_\_\_\_  
Date