

Del Mar College Credential Evaluation Summary

PART I To be completed by Department Chair.

Name:	Colleague ID#:	<input type="checkbox"/> full time <input type="checkbox"/> part time
Teaching Discipline:	Course Assignments: (Specify course classification with D, N, and/or T)	

EDUCATION List degree(s) in order earned:

Year	Major Field	Degree	Institution
2			
3			
4			
5			

YEARS OF TEACHING EXPERIENCE:

			Total
DMC Full Time:	DMC Adjunct:	Post-Secondary Other:	
Primary Teaching Field:		No. of Graduate Hours:	
Secondary Teaching Field:		No. of Graduate Hours:	
Occupational/Technical Only: <small>Bachelor's Degree in the field of study; or minimum of associate's degree PLUS demonstrated competencies in teaching field (example: experience in field, licensure, certification, honors and awards, or other demonstrated competencies and achievements); or meets criteria through justification.</small>			
Total documented years of work experience in technical field other than teaching			

PART II To be completed by Department Chair.

<input type="checkbox"/> Official Transcripts attached.	Highlight all courses in teaching field considered to meet the criteria for faculty credentials, as defined by SACS.
<input type="checkbox"/> Official Transcripts on file.	
<input type="checkbox"/> Official transcript not attached or on file. Instructor has been informed to request and to submit official transcripts to Chair. Copy of memo attached.	
<input type="checkbox"/> Meets qualifications through justification. Justification form (ADM 049) to be completed by Department Chair and signed by Dean of the division and Provost/Vice President for Academic Affairs attached.	

PART III To be completed by Department Chair and Dean.

Academic Transfer Courses	Meets Criteria: <input type="checkbox"/> yes <input type="checkbox"/> no	Occupational Courses	Meets Criteria: <input type="checkbox"/> yes <input type="checkbox"/> no
<input type="checkbox"/> Masters Degree and 18+ graduate hours in teaching discipline; or <input type="checkbox"/> Masters Degree in teaching discipline; or <input type="checkbox"/> *Meets Criteria through justification. <i>(Attach documentation)</i>		<input type="checkbox"/> Bachelor's and/or Degree in the field of study; or <input type="checkbox"/> Associates Degree PLUS demonstrated competencies in teaching field; or <input type="checkbox"/> *Meets Criteria through justification. <i>(Attach documentation)</i>	
Developmental Courses	Meets Criteria: <input type="checkbox"/> yes <input type="checkbox"/> no	Deficient	<input type="checkbox"/> yes <input type="checkbox"/> no
<input type="checkbox"/> Bachelor's degree in the field of study; or <input type="checkbox"/> *Meets Criteria through justification. <i>(Attach documentation)</i>		An instructor with a deficiency will be informed in writing by the Dean, and an appropriate course of action will be determined to remove the deficiency.	

**Copy of interpretation documentation for justification must be attached.*

(1) Department Chair: _____	Date: _____
(2) Dean: _____	Date: _____
(3) Provost/Vice President for Academic Affairs: _____	Date: _____