

## Justification of Faculty Qualification

Faculty Name:	Colleague ID#:
Department:	Teaching Discipline:
Course Assignments: (Specify course classification with D, N, and/or T)	

Justification of Qualifications: (Attach additional pages, if necessary, for justification and explain or interpret how the qualifications relate to the course or courses that the faculty member is teaching. Also, attach copies of documents referenced, such as letters from employers, licensures, certifications, awards, or other documents of demonstrated competencies and achievements.)

### **APPROVALG**

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