

**Del Mar College
Non-credit Credential Evaluation Summary**

PART I: (To be completed by Coordinator or Director.)

Name:	Colleague ID#:
Subject Areas:	

EDUCATION: (List degree(s) in order earned.)

	Year	Major Field	Degree	Institution
1				
2				
3				

TEACHING EXPERIENCE: (Years)

					TOTAL
Full-Time:	At DMC:	At Other Colleges:	In Public Schools:	Other:	
Part-Time:	At DMC:	At Other Colleges:	In Public Schools:	Other:	
Total Years of Teaching Experience					

WORK-RELATED EXPERIENCE: (Years)

1	Job Classification:	Years:
2	Job Classification:	Years:
3	Job Classification:	Years:

PART II: (To be completed by Coordinator or Director.)

- Official transcript attached. (Required) Official transcripts on file. (Required)
- Official transcript not attached. Instructor has been informed to request and to submit official transcripts.
- Meets work-related experience criteria (Minimum of five years. Documentation attached.)
- Meets special licensure or certification requirements. (Copy attached.)

PART III: (To be completed by Director or Assistant Dean and Dean.)

- Meets criteria through:
- Master's Degree Bachelor's Degree Associate's Degree Work-related Experience
- Special licensure or certification requirements
- Meets criteria through justification. (**ADM 049** form with relevant documentation attached.)
- Yes No Deficient: An applicant with a deficiency will not be hired as an instructor.

APPROVAL:

Director/Assistant Dean	Date
Dean	Date
Executive Vice President and Chief Academic Officer	Date