

College Relations Biographical Information Form for Full-Time Faculty and Exempt Employees

Name (the way you want it in print)	Semester and year employed
College position and/or title	Campus extension number
College department and building	Email address
Resume attached Yes No	Photograph on file? Yes No
Degrees (what, when, and from where)	
Professional experience prior to Del Mar, including dates of	employment
Professional organizations, offices held (please explain titles	s and Greek terms)
Academic leadership or officer positions	
Academic honors and awards	
Civic and service organizations	
Published works	
Special Interests	
Would you consider a speaking engagement? Yes No	o If Yes, on what subjects:
I understand that this information may be used for campus publicity	y and other functions of the College Relations Office.
Signature	 Date