

Instructions for the Certification of Credentials and Qualifications for Faculty Appointments

Instructions: To be completed by the academic program director (or designee), approved by the dean(s) and the Office of the Provost, and filed in the Office of the Provost for every *Instructor of Record* for each teaching discipline taught. Please see the <u>Instructor of Record and Credentials Policy</u>, including each program's credential memorandum, for additional information. Complete the required Sections 1-4, and if necessary, complete Sections 5 and/or 6. Attach necessary documentation.

Section 1: Enter the faculty information. If the CWID is unknown, leave blank. The term effective should indicate the first term the faculty member will teach the course(s). Indicate the faculty type (select "adjunct faculty" for all types of adjuncts including paid lecturers and courtesy appointed faculty). All faculty are expected to demonstrate competency in spoken English; please indicate selection. If the faculty member will be Graduate Faculty, indicate selection. See The Graduate Faculty (FAM II.E.5) and the graduate program form that outlines the specific criteria for Graduate Faculty Types I and II in that graduate program.

Section 2: Select the qualifications for only <u>one</u> teaching discipline per form. Write the level and prefix for all CofC courses in the discipline that can be taught (current or future). If the faculty member is only eligible to teach a specific course or set of courses, please be specific. **Select only ONE statement of qualification based on the standards outlined below.**

Qualifications: The College of Charleston and Southern Association of Colleges and Schools Commission on Colleges (SACSCOC) have established the following minimum qualifications for faculty.								
Undergraduate Teaching	■ Earned doctorate or other terminal degree in the teaching discipline or an equivalent discipline OR							
	■ Master's degree in the teaching discipline or an equivalent discipline OR							
	 Master's degree or higher with a concentration in the teaching discipline, including a minimum of 18 graduate hours in the teaching discipline or equivalent discipline OR 							
	■ In the absence of a completed master's degree, a concentration may be established through official documentation confirming that (1) as part of the instructor's doctoral or terminal degree program, the equivalent of a master's degree was achieved, <u>and</u> (2) at least 18 graduate hours in the teaching or a related discipline have been successfully completed*							
Graduate Teaching	■ Earned doctorate or terminal degree in the teaching discipline or an equivalent discipline*							
* Exceptions:	May be granted if there is approved, documented evidence of strong alternative qualifications. See the <u>Policy</u> for details and complete Section 6, the "Statement of Alternative Qualification."							

Section 3: Indicate how the degree documentation is submitted. Attach official transcript(s) or U.S. equivalency evaluation(s), plus a current CV. For multiple degrees, attach additional transcripts. See the <u>Policy</u> for details about official documentation.

Section 4: List highest earned degree. List additional degree(s) if the highest degree is not sufficient for specific credentialing per the Statement of Qualification selected in Section 2. If needed, attach an additional list.

Section 5: Complete ONLY if indicated by your selection in Section 2. Attach cop(ies) of transcript(s) in addition to the official transcript(s). On the copy, highlight the graduate course titles and hours, then write the total graduate semester credit hours, sign, and date. If course titles are truncated or illegible, please write them out or include a typed list. Also, write out the title of the dissertation/thesis if applicable to the teaching discipline.

Section 6: Complete ONLY if indicated by your selection in Section 2. Submit a statement using the PDF template **OR** the Word template, **OR** attach your own Word document. Describe the course(s) and all qualifications that apply. Use a header and write a narrative for each qualification checked. Clearly <u>describe the relationship</u> between these qualifications and the course content and/or expected learning outcomes of the <u>specific CofC course(s)</u> to be assigned to the faculty member. Attached supporting documents as directed. If any degrees or graduate coursework in the discipline were completed, also complete Section 5. Finally, summarize the full narrative into a 1000-character abstract on the form (or write "see attached").

Questions? Additional information is available at http://academicaffairs.cofc.edu/procedures-and-practices/credentials. If you have any questions, please contact the Office of the Provost at 843.953.5527 (or email http://academicaffairs.cofc.edu/procedures-and-practices/credentials. If you have any questions, please contact the Office of the Provost at 843.953.5527 (or email https://academicaffairs.cofc.edu/procedures-and-practices/credentials. If you have any questions, please contact the Office of the Provost at 843.953.5527 (or email https://academicaffairs.cofc.edu/procedures-and-practices/credentials. If you have any questions, please contact the Office of the Provost at 843.953.5527 (or email https://academicaffairs.cofc.edu/procedures-and-practices/credentials.



Certification of Credentials and Qualifications for a Faculty Appointment See instructions and complete sections as directed.

1. FACULT	Y INFOR	EMATION:						
Name of Appointee:					CWID (if	CWID (if known):		
Faculty Type:				Term Effe	Term Effective:			
Graduate Faculty:						English Competency:		
in the discipline	e that can be	taught (current or f	uture). If	the faculty n	nember is only eligible to	teach specific course	the prefix for all CofC courses e(s), describe the course set COMM 514 Social Media"	
CofC Teaching Discipline:	g Co	urse Level:	Statement of Qualification: Check <u>one</u> statement based on the credentials standards for <u>this</u> discipline.					
<u> </u>		Undergraduate	☐ Teri	minal	☐ Master's degree	☐ Master's degree	(or	
		Graduate*	degree		in the <i>teaching</i>	higher) in any discip		
		Both*	teachir	ng ne listed	discipline listed (or an equivalent	AND 18 or more	qualifications. urs (Complete # 1 - 6. Skip	
	*	u aua di saka kan alaisa a		equivalent	discipline). (Complete	graduate credit hou in the teaching	#5 if no applicable	
	ind	or graduate teaching, icate "Graduate	discipli		#1 - 4. For graduate	discipline. (Complete	#1- coursework was	
See examples giv	on in	ulty" type in #1.	(Comple	ete #1- 4.)	teaching , also complete #5 - 6.)	5. For graduate teachi	ing, taken.)	
					·	also complete no.,		
3. DEGREE	DOCUMI	ENTATION: Chec	k ONE. Att	tach required o	official document(s) and CV	. For multiple degrees, a	ttach additional transcripts.	
☐ Official trans	script(s) or o	fficial electronic tran	script(s)	from a U.S. ir	nstitution accredited by a	a regional accrediting	agency are attached	
☐ Official trans	script(s) are a	already on file at the	e College	of Charlesto	n (Please confirm by checking	g the <u>shared folder</u> or conf	firm with the Office of the Provost.)	
☐ Official trans	script(s) are	on file at a joint pro g	gram inst	itution:		, and an <u>off</u>	icial certified copy is attached	
☐ Degree will	be awarded	by	and a <u>let</u>	ter from the	granting institution and	a transcript showing t	he A.B.D. status are attached	
attached (or		d on		=		=	ng a translation, if needed, is quired. Form will be updated by the	
					List additional degree(s) ection 2). (If needed, plea			
Degree Discipline/Major of Degree (verbatim from transcript)		ree	Date Awarded	Institution		6-Digit CIP Code Search for code on NCES.gov.edu or leave blank.		
the course titles the copy. If cou	s and hours ours ours ours ourse titles are transcript(on a <u>copy</u> of the tran truncated or illegib s) are attached docu	nscript(s) le, please imenting	(not on the one write them s ≥ 18 gradua	original). Write the total out. Also, include the tit te hours in the above Co	graduate semester cr le of the dissertation/ ofC teaching discipline	Section 2. Check ONE. Highlight redit hours, sign, and date on thesis, if applicable. The cor an equivalent discipline). The left if indicated in Section 2.)	
CERTIFICA	ATION:							
Academic Program Director (Chair/Director):							ate:	
Dean(s):								
Graduate School Dean/Associate Dean (required only for graduate faculty):								
Drovest/Associa				D-				



Certification of Credentials and Qualifications for a Faculty Appointment (Continued)

STOP Complete this page and submit a Statement of Alternative Qualifications ONLY if indicated in Section 2.

6. STATEMENT OF ALTERNATIVE QUALIFICATIONS: If indicated in Section 2, complete this page and attach a

statement using the template provided or a Word document. Describe the course(s) and all qualifications that apply. Use a header and write a narrative for each qualification checked. Clearly describe the relationship between these qualifications and the course content and/or student learning outcomes of the specific CofC course(s) to be assigned to the faculty member. Include dates and titles for each qualification. Attach supporting documents as directed. If any degrees or graduate coursework in the discipline were completed, please also complete Section 5 and reiterate these academic qualifications in the narrative. Name of Appointee: ___ Course(s) that will be taught:_____ Course Title(s) (if applicable and not given above):____ Attachment type (check one): Word template a separate Word document The attached Statement of Alternative Qualifications includes the following (check all that apply): □ Course description and/or expected learning outcomes (Required.) ☐ Research and Publications * ☐ Related Work Experience ☐ Professional Licensure or Certification † ☐ Special Training [†] ☐ Documented Teaching Excellence in Discipline † ☐ Honors, Awards, or Special Recognition * † ☐ Other Competencies or Achievements * * If there are numerous listings, describe the qualification, cite a few examples, and then highlight all listings that apply on an attached copy of the CV. [‡] Attach any supporting documentation or evidence of the achievement of this qualification. Abstract of the Statement of Alternative Qualifications: In addition to the full statement, use the space below to summarize the full Statement of Alternative Qualifications in 1000 characters or less (or write "see attached" and attach a separate Word document). **Abstract:** Limit to 1000 characters. Abstract will appear in Column 4 of the Faculty Roster. **CERTIFICATION OF ALTERNATIVE QUALIFICATIONS:** Academic Program Director (Chair/Director): ______ Date: _____ Dean(s): _____ Date: _____ Graduate School Dean/Associate Dean (required only for graduate faculty): Date: Provost/Associate Provost: Date:

SACSCOC Liaison (required only for alternative qualifications): Date: