Non-Credit Instructor Qualification Form

This form documents a non-credit instructor’s credentials as required by a Florida SouthWestern State College academic school or division and for the listed courses and titles. *With the exception of signatures, this form must be completely typed and printed front to back.*

**Instructor Information:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Last Name** |  | **First Name** |  |
| **Banner ID** **(8 digits)** |  | **Campus** |  |
| **School or Division** |  |

**List Continuing Education Courses and Titles:**

|  |  |
| --- | --- |
| **Course Prefix and Number** | **Course Title** |
|  |  |
|  |  |
|  |  |

**Education (if applicable):**

Record and attach transcripts for only those degrees or other education-related qualifications required for the instructor to teach a non-credit course(s):

|  |  |  |  |
| --- | --- | --- | --- |
| **Institution Granting** **the Degree or Credit** | **Degree or Hours** | **Major/Subject** | **Date Degree Granted (if applicable)****(xx/xx/xxxx)** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Certifications (if applicable):**

Record and attach copies of any necessary certifications required for the instructor to teach the listed non-credit course(s):

|  |  |  |
| --- | --- | --- |
| **Certification** | **Issue Date****(xx/xx/xxxx)** | **Expiration Date****(xx/xx/xxxx)** |
|  |  |  |
|  |  |  |

**Required work experience (if applicable):**

Record and attach documentation of work experience required for the instructor to teach the listed non-credit course(s):

|  |  |
| --- | --- |
| **Required work experience** | **Required years of work experience** |
|  |  |
|  |  |

**Program Coordinator’s Name, Signature, and Date (if applicable):**

|  |  |  |
| --- | --- | --- |
| **Typed Name** | **Signature** | **Date** |
|  |  |  |

**Associate Dean’s Name, Signature, and Date (if applicable):**

|  |  |  |
| --- | --- | --- |
| **Typed Name** | **Signature** | **Date** |
|  |  |  |

**Dean’s Name, Signature, and Date:**

|  |  |  |
| --- | --- | --- |
| **Typed Name** | **Signature** | **Date** |
|  |  |  |