Instructional Qualification Form

FLORIDA
SOUTHWESTERN
STATE COLLEGE

Clinical Associates, Research Assistants, and Other Non-Faculty Instructional Staff

This form documents the credentials for clinical associates and other non-faculty instructional staff who support instruction of courses at Florida SouthWestern State College. The completed form, along with supporting documents, should be sent to the Office of the Provost and Vice President of Academic Affairs along with the Personnel Action Form. Official transcripts from all institutions used to qualify clinical associates, research assistants and other non-instructional staff must be received in the Office of Human Resources within thirty days of the hire date.

Last Name	First Name	Eight digit Banner ID
		@
Discipline		☐ Returning instructor

School or Division	Campus, Center, or Off Site
Choose an item.	Choose an item.

Instructor Type	Instructional Location (if off site)
Choose an item.	

Education			

List **only** the degree(s) used to determine qualification.

Institution	Degree Earned	Major/Subject	Degree conferred date (XX/XX/XXXX)
	Choose an item.		
	Choose an item.		
	Choose an item.		
	Choose an item.		

Commented [BM1]: The Banner ID must be included when the IQF is submitted for review and approval, even for newly hired faculty members.

Commented [BM2]: Make sure to indicate if the faculty member is new or returning. Keep in mind that official transcripts may already be on file for returning faculty members.

Commented [BM3]: Only list institutions needed for the qualification of the faculty member. For example, if someone has a qualifying Master's degree, only the Master's degree needs to be listed. Unofficial transcripts may be used for the initial qualification, but official transcripts need to be received by HR within 30 after the hire date.

Always include copies of the transcript(s).

Commented [BM4]: Make sure to include the *conferral/awarded date* indicated on the transcript and highlight the degree on the transcript.

VPAA: 8/20/14; 01/22/18, 06/07/18

Make sure you are using the current template.

List Additional Qualification Criteria (Licenses, certifications, and other professional qualifications)	
License, Certification, or Professional qualification	**Expiration Date (if applicable)**

Signatures

	Date
Chair, Director, or Coordinator (if applicable; sign below and date) Type Name Here	
Associate Dean (if applicable; sign below and date) Type Name Here	Date
Academic Dean (sign below and date) Type Name Here	Date
Vice Provost for Academic Affairs (sign and date) Dr. Eileen DeLuca	Date

Entered in Banner by:	Date