This form updates the expiration date on previously documented credentials for clinical associates and other non-faculty instructional staff who support instruction of courses at Florida SouthWestern State College. The completed form and attached evidence of renewed credentials must be shared with the Office of Accountability and Effectiveness for the credentials to be updated prior to the license or certification date of expiration.

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| **Last Name (include previous name)** | **First Name** | **Eight Digit Banner ID** |
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| **Discipline** | **Instructor Type** | **IQF Type** |
|  | Choose an item. | Updating Expiring Credentials |

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|  **School** | **Campus, Center, or Off Campus** | **Instructional Location (if Off-site)** |
| Health Professions | Choose an item. |  |

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| **List Supplemental Qualification Criteria** (include only the Licenses, Certifications, etc. that have updated expiration dates) |
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**Signatures**

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| --- | --- |
| **Director, Chair or Coordinator** (sign and date)Type Name Here | **Date** |
|  |  |