

Wichita State University Documentation of Faculty Credentials for Lecturers
(Adjunct Faculty appointed through ePAF)

This form documents that lecturers meet HLC qualifications for teaching. This form must be completed for all lecturers listed as instructors of record. The academic department is responsible for completing and submitting this form to Human Resources, Box 15.

Section 1: Employee Name: _____
Last First MI

myWSU ID: _____

College: _____ Department: _____

New Hire (fill out Sections 2, 3 & 4)

Re Hire (skip Sections 2, 3 & 4 and sign/date)

Section 2: Earned Degree Information

| Earned Degree (Highest First) | Discipline | Institution | Year Degree Received |
|-------------------------------|------------|-------------|----------------------|
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| | | | |
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Choose one code (by letter) from list below that matches the highest credential listed above and insert here _____ (SHRPED code for PPRSKIL education attainment):

- (A) Not Indicated (B) Less Than High School Graduate (C) High School Graduate or Equivalent
(D) Technical School (E) One Year College (F) Two Years College (G) Two Year College Degree
(H) Three Years College (I) Four Years College (J) Bachelor's Degree (K) Some Graduate School
(L) Master's Degree (M) Doctorate Degree (N) Post Doctorate

Section 3: Course number(s) and course(s) to be taught (e.g., CHEM 211, General Chemistry I):

Section 4: Basis for Qualification, select _____ Graduate degree in discipline or related field
or

_____ No graduate degree*, but has additional qualifications. Indicate the most relevant qualification by number **and attach CV**.

- (1) Professional licensure or certification
- (2) Related work experience
- (3) Specialized Training
- (4) Research and publications
- (5) Honor, awards, or special recognition
- (6) Documented teaching excellence in discipline
- (7) Other

*If "No graduate degree" complete Justification Narrative:

Department Chair Signature: _____ Date: _____

Entered by Human Resources: _____ Date: _____

Entered by AA Faculty Records: _____ Date: _____