

M#

SECTION I: EMPLOYEE INFORMATION

Last	First	Middle	Rank
College/School/ES High School		MSU Department	Dept. Phone

Full-time Faculty
 Adjunct Faculty
 Military Science
 Eagle Scholars
 Category Change
 Other _____

(Attach justification memo.)

SECTION II: DEGREE INFORMATION

*Original transcripts for the **two** highest degrees and a current vita must be submitted.*

GRADUATE	College/University	Major	Major Hours	Subconcentration	Degree	Date Awarded	

UNDERGRADUATE	College/University	Area/Major	Major Hours	Degree	Date Awarded	

SECTION III: COURSE(S) TO BE INSTRUCTED *(Prefix and Course Number)*

SECTION IV: OTHER QUALIFICATIONS TO BE CONSIDERED

Please check all other qualifications that apply to the discipline and should be considered for credential certification at the level requested. Attach a completed Exceptional Expertise form that includes a short narrative listing specific details of each and provide documentation/copies of all certifications, licensures, training or research.

- | | | |
|--|--|--|
| <input type="checkbox"/> Degree(s) from related discipline | <input type="checkbox"/> Exceptional professional experience in requested discipline | <input type="checkbox"/> Documented scholarship (including research and creative productions) in related discipline. |
| <input type="checkbox"/> Credentials, Licensure(s) Ex. CPA | <input type="checkbox"/> Special training | <input type="checkbox"/> Other competencies |
| <input type="checkbox"/> Military experience | <input type="checkbox"/> Awards and honors | |

TO BE COMPLETED BY DEAN

Verify and check that the following are attached:

- Current Vita
 Original Transcripts (Two Highest Degrees) **NO COPIES**

I have read the Faculty Credentials Categories and propose the following degree category for this faculty member:

_____	_____	_____
Category	Dean's Signature	Date

OFFICE OF THE PROVOST ONLY

- Current Vita
 Original Transcripts

Category Authorized: _____

Date: _____

Approved: _____