

UHCL FACULTY CREDENTIALS VERIFICATION

Name: _____

Empl ID#: _____

College: _____

New/Returning: _____

Expected courses to be taught at UHCL

Rubric, Number, Title of Course(s) Scheduled to teach (use a second form if more space is needed):

Rubric & Number	Course Name

Professional Credentials Related to courses to be taught at UHCL

Graduate Degree(s)	Major	Institution	Year Awarded

List 18 hours of transcript graduate courses that correspond to the objectives of the course(s) to be taught (use a second form if more space is needed).

Rubric & Number	Hours Awarded	Course Name	Rubric & Number	Hours Awarded	Course Name

Unique field experience, specific related course work or competencies (must be documented in file):

~For the Office of the Vice Provost for Academic Affairs Only~

Course(s) or Subject(s)

Approved

Approved to teach both graduate and undergraduate courses.

Approved to teach graduate courses with this Instructor of Record:

Approved to teach undergraduate courses only

Approved as a Graduate Teaching Fellow. (Must have Master's Degree)

Approved as a Graduate Teaching Assistant. Must be graduate student, working under the direct supervision of this Instructor of Record:

Date

Vice Provost