

Texas A&M University-Kingsville
Credential Evaluation Summary

PART I – Education (to be completed by chair and verified by dean)				
Name:		SSN:		
Education List degrees earned				
	Year	Major Field	Degree	Institution
1				
2				
3				
4				

Part II – Position Description (to be completed by chair and verified by dean)	
Position Title:	
<input type="checkbox"/> Tenured or Tenure Track <input type="checkbox"/> Non-tenure track <input type="checkbox"/> Temporary	
<input type="checkbox"/> Full time <input type="checkbox"/> Part time <input type="checkbox"/> Requires membership on graduate faculty	
Anticipated courses to be taught:	

PART III – Verification of Qualifications (to be completed by chair and verified by dean)	
<input type="checkbox"/> Official transcripts are on file in the Provost’s office.	
<input type="checkbox"/> For faculty teaching only developmental courses: Bachelor’s degree in teaching discipline. List additional qualifications (training, graduate credits, etc.):	
<input type="checkbox"/> For graduate teaching assistants: 18+ graduate hours in teaching discipline. Plans are in place for direct supervision, in-service training, and periodic evaluations.	
<input type="checkbox"/> For faculty teaching only undergraduate courses: Doctorate or Master’s degree in teaching discipline, or <input type="checkbox"/> Out-of-field Doctorate or Master’s degree but 18+ graduate hours in teaching discipline. <i>Attach completed “Justification of Faculty Qualifications” form.*</i>	
<input type="checkbox"/> If teaching assignment includes graduate courses: Doctorate in teaching discipline.	
<input type="checkbox"/> Lacks required degree but is qualified through justification. <i>Attach completed “Justification of Faculty Qualifications” form.*</i>	

*http://www.tamuk.edu/academicaffairs/forms/justification_of_faculty_qualifications.pdf

PART IV – Approvals			
_____ Department Chair’s Signature	_____ Date	_____ Dean’s Signature	_____ Date
Submit to Office of the Provost and Vice President for Academic Affairs			
_____ Provost or AVPAA		_____ Date	