


The University of Texas at Dallas
Qualifications for Instructional Personnel (Faculty Credentialing Form)

Appointee's Name: _____

UTD Net ID: _____

Academic Discipline of Teaching Assignments and Course Prefix and Numbers:



Appointee's Classification: ☐ Tenure System Faculty ☐ Non-Tenure System Faculty
☐ Teaching Assistant/Associate ☐ Other

Appointee's Status: ☐ Full-Time UTD ☐ Part-time UTD ☐ Other Affiliation

Academic Credentials. Include In-Progress degrees with future graduation dates.

Earned Degree	Academic Discipline	Awarding Institution	Degree Date	Terminal Degree	Transcript On File
				<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Justification if the degree is not a terminal degree in the specific Academic Discipline of the assignment. Include relevant publications, research, professional licensure or certification (with current copies attached), honors and awards, evidence of relevant work experiences in a related field, or

The University of Texas at Dallas
Qualifications for Instructional Personnel (Faculty Credentialing Form)

number of completed hours in a relevant doctoral program. Attach documents as necessary. CVs and public CVs or resumes should be updated annually.

Appointee has relevant creative productivity/professional achievement: ☐ Yes ☐ No

Appointee has current professional licensure or certification: ☐ Yes ☐ No

Appointee has relevant work experience in the disciplinary field: ☐ Yes ☐ No

Please describe additional credentials (attach copies of transcripts, Curriculum Vitae (CV), public CVs, resumes, current licenses, certifications, honors, or awards).

CERTIFICATION

Program/Department Head / Associate Dean Signature/Date: _____

School Official (Dean or Designee Signature/Date: _____

Faculty Credentialing Officer: _____