

Graduate Faculty—5 ggc VUH 'A Ya VYfg Jd Application

Jackson College of Graduate Studies, University of Central Oklahoma



To insure that this application receives timely consideration, it must be submitted to the Graduate College prior to the end of the semester preceding that in which the candidate is first scheduled to teach a graduate course. The term is five (5) years before a renewal application must be submitted.

(Please type responses to the following)

Candidate Name _____ Date _____

Campus Address _____ Campus Phone _____

College _____ Department _____

- Full-time Temporary Faculty Full-time Permanent Faculty Adjunct Faculty

Graduate Teaching Semester and Year:

- Fall 20____ Spring 20____ Summer 20____

Academic Qualifications: (All applicants. Attach all transcripts showing all degrees earned.)

Degree	Major	Institution	Date of Degree
Bachelor's			
Master's			
Doctor's			

Please include the following in your application packet:

- Transcripts showing all degrees earned including the highest degree earned.
Please circle the "Degree Awarded" on your transcripts.
- Recommendation letter from the Department Chair.
- Current curriculum vitae showing all teaching experiences.

APPROVALS

Signature of Department Chair

Date

Signature of College Dean

Date

Recommendation from the Membership Committee:

- Approval Disapproval

Signature of Chair, Membership Committee

Date

Recommendation from the Graduate Dean:

- Approval Disapproval

Signature of Dean, JCGS

Date