

Qualifications for Full-time 10 Month Faculty and College Lecturers #3111A

POLICY

Full-time 10-Month Faculty and College Lecturers

The hiring Dean shall be responsible for reviewing, analyzing, and verifying applicant transcripts and related degrees, teaching history, professional experience, and certifications. A **Faculty Credentials Audit and Verification Form** (Attachment A) and related formal analysis must be completed for each candidate recommended for hire. These analyses are finalized via approval of the Provost and President (or designee). The forms will be permanently housed in the successful candidate's personnel file in the Office of Human Resources.

All candidates for full-time faculty and lecturer positions at Ocean County College shall meet the following educational and experiential criteria for hire:

Educational Criteria

- A. A Master's degree from a regionally accredited institution of higher education in the field of specialization for which he/she is making application; or
- B. A Master's degree from a regionally accredited institution of higher education in a different field from the one for which the candidate is making application plus 18 graduate credits in the field for which he/she is making application; or
- C. A Master's degree from a regionally accredited institution of higher education in a different field from the one for which the candidate is making application plus at least five years of related professional field experience and/or certification/licensure in the field for which he/she is making application.

Experiential Requirements

- 1. Two years of successful full-time teaching experience in the field for which he/she is making application or at least six semesters of part-time teaching experience at the college level; or
- 2. At least five years of related professional experience and/or certification/licensure in the field for which he/she is making application may be substituted in lieu of teaching experience with the approval of the Provost and President (or designee).

ADOPTED: February 28, 1966
Revised: September 28, 1970
Revised: March 24, 2003
Revised: May 4, 2004

Revised: November 3, 2008
Revised: December 5, 2011
Revised: February 24, 2014
Revised: June 23, 2014

Revised: June 1, 2017*

*Revised from 3111 to 3111A

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PROCEDURE

Attachment A

FACULTY CREDENTIALS AUDIT AND VERIFICATION FORM

(10-MONTH FACULTY/12-MONTH COLLEGE LECTURER II)

(For Use with Policy #3111A)

Candidate Name:			
Position Considered For:		Dept.	
Master's Degree Required:			
Discipline:			
Position #:			
Hiring Dean is requesting approval for credential substitution(s): YES* or NO <i>*If "YES" supporting documentation/analysis must be attached.</i>			
CREDENTIALS SUMMARY:			
A. Master's Degree in Field of Specialization <input type="checkbox"/>			
1. Two years of successful teaching experience in field for which making application or at least six semesters of part-time teaching experience. <input type="checkbox"/>			
2. Five years of related field experience, Certification, Licensure in lieu of teaching experience. <input type="checkbox"/>			
<i>Hiring Dean: Please attach analysis, sign/date here: _____</i>			
B. Master's Degree in Different Field plus 18 Graduate Credits <input type="checkbox"/>			
FIELD: _____			
1. Two years of successful teaching experience in field for which making application or at least six semesters of part-time teaching experience. <input type="checkbox"/>			
2. Five years of related field experience, Certification, Licensure in lieu of teaching experience. <input type="checkbox"/>			
<i>Hiring Dean: Please attach analysis and sign/date here: _____</i>			
C. Master's Degree in Different Field with Five Years of Related Professional Field Experience, Certification, Licensure <input type="checkbox"/>			
NOTE FIELD EXPERIENCE, CERTIFICATION OR LICENSURE: _____			
<i>Hiring Dean: Please attach analysis and sign/date here: _____</i>			
I have reviewed the credentials and analysis submitted by the hiring Dean and approve the substitution(s) indicated above:			

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PROVOST (or designee) PRINTED NAME	SIGNATURE/DATE
PRESIDENT (or designee) PRINTED NAME	SIGNATURE/DATE

COMPLETED, SIGNED FORM AND ANALYSIS / SUPPORTING DOCUMENTATION MUST BE FORWARDED TO THE OFFICE OF HUMAN RESOURCES. OFFERS OF EMPLOYMENT CANNOT BE MADE WITHOUT A COMPLETED CREDENTIALS VERIFICATION FORM.