



Faculty Credentials Checklist

Instructions: This checklist is intended to standardize the credentialing documentation for courses offered on the eCampus platform. Affiliate institutions should follow the Faculty Credentials parameters outlined under Faculty Credentials in the TCSG Operations Manual for the eCampus Platform. Host institutions complete this form, attach the required documentation, and upload the checklist and all referenced documentation as a single PDF file (referred to as the "Checklist File") to the SACSCOC Faculty Credential Module. Home institutions that plan to enroll students in eCampus courses should use the Checklist File and all referenced documentation to demonstrate that the faculty member has the necessary qualifications to teach a given course.

Host Institution Information:

| | |
|---|--|
| <i>Institution Name</i> | |
| <i>Vice President of Academic Affairs Contact Information (Name, Phone and Email)</i> | |

Faculty Member Information:

| | | |
|--|--|----------------------------------|
| <i>Name</i> | | |
| <i>Contact Information (Phone, Email)</i> | | |
| <i>Employee ID</i> | | |
| <i>Faculty Contract Type (Host)</i> | <input type="checkbox"/> Full Time | <input type="checkbox"/> Adjunct |
| <i>Department/Division</i> | | |
| <i>Courses to be Taught (Course Number - Course Title)</i> | Example: CIST2481 - Foundations to Cloud Computing | |

Justification Documentation:

Each Checklist File should contain the following documentation in the order indicated below. The completed file should be scanned into one PDF document and uploaded to the SACSCOC Faculty Credential Module on KMS.

☐ Official Transcripts (All Pages)

| Major | Granting Institution | Degree Type | Date Earned | Attached |
|-------|----------------------|-------------|-------------|--------------------------|
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |

| | | | | |
|--|--|--|--|--------------------------|
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |

☐ **Current Licensures/Certifications**

| License/Certification | Granting Agency | Date of Issue | Date of Expiration | Attached |
|-----------------------|-----------------|---------------|--------------------|--------------------------|
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |

Note: Host and home institutions should verify current licensures/certifications using SACSCOC *Exception Report: Expired Credentials - LB282L/TEC0282 on KMS.*

☐ **Additional Documentation of Qualifications** (this section is used when an individual is qualified using other qualifying documents beyond formal academic credentials)

| Documentation (As Appropriate) | Comments | Attached |
|--|----------|--------------------------|
| <input type="checkbox"/> Resume/Application | | <input type="checkbox"/> |
| <input type="checkbox"/> Publications/Portfolio | | <input type="checkbox"/> |
| <input type="checkbox"/> Online Instruction Experience | | <input type="checkbox"/> |
| <input type="checkbox"/> Former Supervisor Verification of Skills/Knowledge/Experience | | <input type="checkbox"/> |

☐ **Other Documentation. Additional documentation may be provided to demonstrate qualifications and/or academic preparation.**

☐ Other _____

☐ Other _____

File Reviewed for Submission:

The Host Institution's Vice President of Academic Affairs is responsible for reviewing and verifying the complete Checklist File (including this form) prior to uploading to KMS.

| Name of Reviewer (i.e., Host Institution's VPAA) | Review Completed | Signature | Review Date |
|---|--------------------------|-----------|-------------|
| | <input type="checkbox"/> | | |