



Application for Academic Rank (Part-Time Faculty)

Name _____ Department _____ Email _____

1. I am applying for the Academic Rank of (Please check one)

- Assistant Professor Associate Professor Professor

2. Explain below and include *all* evidence of your earned rank with this application to be considered for approval. Include letters or load sheets from *all* colleges, including RHC, for verification.

A. Earned degrees

Degree	College	Confer Date

B. Total Semester Units (beyond most advanced earned degree): _____

Number of upper-division semester units earned beyond BA/BS: _____

Number of upper-division semester units earned beyond MA/MS: _____

C. Experience in Years (120% part-time teaching load is equivalent to one year of service.)

Institution	# of Years
Rio Hondo College	
Other College	
Other College	
Other College	
High School	

D. Credentials Held:

E. Rank Earned at Another College (Provide documentation)

Earned Rank	Name of College	City/State of College	Year Rank was Earned

F. **Significant Prominence:** If applying for rank advancement under significant prominence criteria, please provide evidence of significant prominence in your field of expertise as determined by your division, which includes "Professional Achievement" and "Contributions to the College" to be considered for substitution of teaching experience or years of service. When providing evidence, please indicate your role, responsibilities, and starting/ending dates.

3. **Applicant Certification:** "I certify that the above information is true and correct. I have provided the necessary evidence to determine my academic rank and grant the Academic Rank Committee permission to review it."

_____ Certification Signature _____ Date

Petitioned Rank		Awarded Rank	
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Approved/Recommended By:	Signature	Approval Date
Academic Rank Committee, Chair		
Academic Senate, President		
Superintendent/President		
Board of Trustees		