# OM College of the Mainland.

# Statement of Qualifications Form (SOQ)

#### Comprehensive Standard 3.7.1 of the Principles of Accreditation:

The institution employs competent faculty members qualified to accomplish the mission and goals of the institution. When determining acceptable qualifications of its faculty, an institution gives primary consideration to the highest earned degree in the discipline. The institution also considers competence, effectiveness, and capacity, including, as appropriate, undergraduate and graduate degrees, related work experiences in the field, professional licensure and certifications, honors and awards, continuous documented excellence in teaching, or other demonstrated competencies and achievements that contribute to effective teaching and student learning outcomes. For all cases, the institution is responsible for justifying and documenting the qualifications of its faculty.

#### **Directions:**

In cases where a potential faculty member does not meet the minimum credentials outlined in the Faculty Credentialing Manual, a Statement of Qualifications Form must be completed by the departmental chairperson and signed by the appropriate instructional dean and vice president for instruction. This process is used to request a credential review and establishes justification as to why an exemption to the faculty credential standards should be granted.

Please provide information that demonstrates the candidate's competencies in the discipline/field. Include licensures, certifications, honors and awards, continuing education, continuous documented excellence in teaching and other demonstrated competencies and achievements that contribute to effective teaching and positive student learning outcomes.). This documentation will be retained in the faculty member's personnel filed housed in the Human Resources office.

Faculty Candidate's Name:	Discipline:
Course(s):	Date:

#### **Related Work or Professional Experience:**

Dates (MO/YR)	Work or Professional Experience
elationship of experience to o	course content and other comments:

#### **Licensures and Certifications:**

Dates (MO/YR)	Licensure and Certifications
Relationship of licensures and certificates to course content:	

#### **Honors and Awards:**

Dates (MO/YR)	Honors and Awards
Relationship of honors and av	vards to course content:

#### **Teaching Experience:**

Dates (MO/YR)	Teaching Experience
Relationship of teaching expe	rience to course content:

# **Other Demonstrated Competencies and Achievements:**

Dates (MO/YR)	Demonstrated Competencies and Achievements

Relationship of other demonstrated competencies and achievements to course content:		

### **Justification Summary**

In summary, please describe why an exemption to the faculty credential standards should be granted for this instructor:

I certify that the appropriate transcript or other documentation verifies that the instructor meets the minimum requirements of SACSCOC and COM.

# **Approvals:**

Department Chair	Date
Dean	Date
Vice President for Instruction	Date