

San Mateo County Community College District
FORM 1: APPLICATION FOR EQUIVALENCE TO MINIMUM QUALIFICATIONS
FOR ACADEMIC POSITIONS ONLY

Part A: Completed by the applicant or current employee (Please type or print)

Name:

Email:

Phone/Ext.:

Division/Dept:

Current teaching discipline or non-instructional academic service:

At (select one):

Cañada College

College of San Mateo

Skyline College

Application for Equivalence to Minimum Qualifications for the Discipline

I am attaching supporting materials, such as official transcripts, credentials, licenses, certificates, employer attestations, publications, etc., which validate the following assertion(s): (mark one)

Degree Equivalence

The employee or applicant possesses a degree(s) with similar content to those listed for the relevant discipline. The name of the degree is close to that specified on the Disciplines List but the degree either has a different title or area of expertise or the coursework is slightly different. Equivalence is established through analysis of transcripts and coursework.

Academic Background Equivalence

Related to disciplines in which a Master's degree is not generally expected or available. The employee or applicant must have completed at least 24 semester units (or equivalent) of coursework in the academic field and must possess at least the equivalent level of achievement and the equivalent in breadth, depth of understanding, and rigor in each of the following:

1. A broad cultural education usually met by the general education requirements for any Bachelor's or Associate's degree, and
2. A detailed study of the discipline in breadth, depth, and rigor, usually met by course work required for the degree major.

Professional Achievement Equivalence

The employee or applicant must have completed the general education requirements for any Bachelor's or Associate's degree, and show evidence of outstanding professional achievement and/or substantial training in the requested field. The employee or applicant must submit substantial evidence, which demonstrates that their preparation, teaching experience, work experience, and ability are equivalent to those expected from a person who meets the minimum qualifications.

I understand that administrative and Academic Senate representatives, as well as the appropriate college Vice President, pursuant to current District procedures will review this Application for Equivalence. I understand that their recommendation will be forwarded to the College President for review, and if approved, will be forwarded to the Office of Human Resources for approval by the Board of Trustees.

Applicant Signature

Date

PART B: Completed by the Faculty Equivalency Committee. Responsible administrator forwards to the Academic Senate President and College Vice President, accompanied by supporting documents.

Faculty Equivalency Committee Review Team Members Recommendation:

Do you recommend this applicant receive equivalency to minimum qualifications for the discipline?

- | | | |
|-------------------------|-----------|----------|
| 1. Faculty: _____ | _____ YES | _____ NO |
| 2. Faculty: _____ | _____ YES | _____ NO |
| 3. Faculty: _____ | _____ YES | _____ NO |
| 4. Faculty: _____ | _____ YES | _____ NO |
| 5. Administrator: _____ | _____ YES | _____ NO |

Equivalency to Minimum Qualifications for the discipline of: _____

Overall FEC Recommendation:

Recommended

Not Recommended

Rationale is as follows: *(Attach additional pages if needed)*

Signatures: Faculty Qualifications Committee

Your Signature below acknowledges the process for equivalence for minimum qualifications has outlined according to AP 3.05.1

_____ Faculty,	_____ Date
_____ Faculty,	_____ Date
_____ Faculty,	_____ Date
_____ Faculty,	_____ Date
_____ Administrator,	_____ Date

PART C: SIGNATURES

Completed by the College Academic Senate President and appropriate Vice President and forwarded to the College President for recommendation, accompanied by supporting documents.

Approval of the process of determining equivalency to minimum qualifications for the above-listed candidate and discipline(s) is verified by the following signatures.

Yes - I concur with the overall recommendation of the FEC.

No - I do not concur with the overall recommendation of the FEC.

Signature:

College Academic Senate President, College

Date

Yes - I concur with the overall recommendation of the FEC.

No - I do not concur with the overall recommendation of the FEC.

Signature:

Vice President, College

Date

***If the President does not concur with the recommendation of the FEC and/or the college Vice President and Academic Senate President, the justification and reasoning will be communicated, in writing, to the FEC the Academic Senate President, and the District Academic Senate, within ten (10) working days.*

Yes - I concur with the overall recommendation of the FEC.

No - I do not concur with the overall recommendation of the FEC.

Signature:

President, College

Date

The applicant should be granted equivalency

Yes

No

Date of Board of Trustees Approval:

Upon concurrence of the college president, the equivalence recommendation will be forwarded to the Board of Trustees for consideration. The college president is responsible for forwarding this form to Human Resources. A copy of the Board action will be placed in the applicants personnel file.