NOVA | Northern Virginia Community College

Form 105–014
Rev. 8/19

# Request for Review of Credentials for Promotion

Faculty member: Please complete this form and submit it to your supervisor to initiate the review of your credentials for promotion. Please include an updated Curriculum Vitae (C.V.), copies of unofficial transcripts as needed, and any additional documentation that you believe is relevant to your credentials.

EMPLID: _____ Campus: _____ Division: _____

To: _____
(Supervisor)

From: _____ Teaching Field/Position Working Title: _____
(Printed Name of Faculty Member)

I have reviewed the requirements for promotion according to the VCCS-29, and I believe that I will be eligible for promotion to the rank of _____ in column # ____ with the beginning of the next contract year. If you agree, please sign below and forward to Human Resources at credentialing@nvcc.edu.

## VCCS-29 Minimum Criteria

List the minimum criteria for education and experience as listed on the VCCS-29 for your desired rank. Note: Promotion requirements for the rank of Professor requirements are listed in the even-numbered column (2, 4, or 6) for your respective discipline.

**Performance Evaluation Rating**: Meets Expectations on Most Recent Evaluation

Education/Academic Preparation:

_____

_____

_____

_____

Experience:

Related Occupational Experience: _____

Total Teaching Experience: _____

Full-Time Community College Experience: _____

VCCS Experience in Previous Rank: _____

## Faculty Member Credentials

List your credentials according to the requirements as listed on the VCCS-29 for your desired rank.

**Performance Evaluation Rating**: _____

Education/Academic Preparation: I have completed or will complete by my next contract date:

_____

_____

_____

_____

Experience

Related Occupational Experience: _____

Total Teaching Experience: _____

Full-Time Community College Experience: _____

VCCS Experience in Current Rank: _____

_____
(Signature of Faculty Member) Date

_____
(Signature of Supervisor) Date