

PCC Adjunct Faculty: Academic Rank Advancement Application

Date: _____ Semester/Year: _____

Name: _____ Department/Division: _____

Faculty Position: (Academic or Career/Technical) _____

Email Address: _____

Current Rank/Requested Rank: Adjunct Instructor/Adjunct Assistant Professor

Current Salary Scale Class/Step (confirm with your Division Office/Manager): _____

Academic Preparation: Degree/Year Awarded/Awarding Institution

Academic Experience at PCC

Number of semesters (Fall or Spring; excluding intersessions) completed as an Adjunct Faculty member at PCC: _____

Have you completed eight (8) semesters as an Adjunct Faculty member PCC? _____

All of the information provided in this application will remain confidential and is subject to verification by the Academic Rank Committee. Change of rank is subject to approval by the Academic Senate and the President of the College. Notification will be provided to applicant when this process is complete.

Applicant Signature: _____

Date: _____