



This form is to be completed by the Department Head prior to making an offer of adjunct academic employment to a new hire. Complete the information requested below and forward completed form, official transcripts and verification of employment experience to **Human Resources, District Office. This form should be forwarded at least two (2) weeks prior to the assignment start date. (See HR R-130, *Adjunct Faculty Hiring*, and HR R-101, *Faculty Equivalency Process*.)**

Date _____ Campus _____ Discipline _____
 (list one discipline only)

• Assignment: _____ 20_____
 Course Name / Number Meeting Days / Time Section Number Semester

• Candidate: _____
 Last Name First Name Middle Name Suffix Social Security Number

Address: _____
 Number/Street City State Zip Code

Prior Employment in LACCD No Yes If Yes, Employee Number _____

I have reviewed the above candidate's official transcripts and work experience information and I am satisfied that this candidate meets the minimum qualifications for employment as an adjunct academic instructor with the Los Angeles Community College District. Upon receipt of authorization from Human Resources, Educational Services Center, I will make an offer of employment to this candidate for the _____, 20____ semester to teach the course indicated above.

Request for Emergency Processing: A significant need to fill the above adjunct academic assignment has made it impractical to comply with the requirement to provide two (2) weeks pre-employment notification before making the employment offer. I have reviewed the above candidate's official transcripts and work experience information and I am satisfied that this candidate meets the minimum qualifications for employment as an adjunct academic instructor with the LACCD.

 Department Chair (Print Name/Sign)

 Date

 Dean (Print Name/Sign)

 Date

 Vice President (Print Name/Sign)

 Date

Please Note: Adjunct faculty hiring requires two levels of written clearance from ESC Human Resources before the PCR can be initiated.
 (1) Notice of Minimum Qualifications clearance and
 (2) Pre-employment clearance (I-9, TB Risk Assessment, and Live Scan/Fingerprinting).

FOR DISTRICT OFFICE USE ONLY

INCOMPLETE: *Need to Submit:*

DENIED: *Reason:*

APPROVED BY CREDENTIAL: *Must be in subject designated above.*

Type: V905 STCJC Other: _____

Issued: _____ Expires: _____ Major Subject: _____

APPROVED BY MINIMUM QUALIFICATIONS (AB1725)

Degrees	Name of College / University	Major
JD		
PhD		
MA		
BA		
AA		

Experience: _____ years at _____ as a

APPROVED BY EQUIVALENCY
 Equivalence on File: Yes No Equivalence Sent: Provisional to Campus DAS Applicant

Employment Offer Authorization: Approved Denied

 Vice Chancellor, Human Resources, or designee

 Date