



DRURY
UNIVERSITY

For office use:
Hire date _____
Location _____
ID # _____

Adjunct Faculty Application

Last name _____ First _____ M.I. _____

Street address _____

City _____ State _____ Zip code _____

Social security number _____ - _____ - _____ Email address _____

Telephone: (home) _____ - _____ - _____ (work) _____ - _____ - _____ (cell) _____ - _____ - _____

Place of employment _____

Title _____ Years there _____

Campus locations where you are available to teach:

CHECK ALL THAT APPLY

- | | | |
|--|--------------------------------------|---------------------------------------|
| <input type="checkbox"/> Ava | <input type="checkbox"/> Rolla | <input type="checkbox"/> Licking |
| <input type="checkbox"/> Cabool | <input type="checkbox"/> Springfield | <input type="checkbox"/> Monett |
| <input type="checkbox"/> Fort Leonard Wood | <input type="checkbox"/> St. Robert | <input type="checkbox"/> Online |
| <input type="checkbox"/> Lebanon | <input type="checkbox"/> Thayer | <input type="checkbox"/> Other: _____ |

REQUIRED DOCUMENTS FOR APPLICATION: In addition to this application, please attach a current resumé and copies of your graduate and undergraduate transcripts. Submit all three to the address below.

Please return your materials to:

Dean
College of Graduate
and Continuing Studies
Drury University
900 North Benton Avenue
Springfield, Missouri 65802

Applicants for admission and employment, students, parents of elementary and secondary school students, employees, sources of referral of applicant for admission and employment and all unions or professional organizations holding collective bargaining or professional agreements with Drury University are hereby notified that Drury University is an open and welcoming community with students, faculty, and staff from a rich variety of cultures, races, and socioeconomic backgrounds. The mission and goals of the university dedicate the institution to being a community which "affirms the equality and worth of all peoples" and appreciates the "diversity of human culture, language, history, and experience." Consistent with this philosophy, it is Drury's policy not to discriminate on the basis of any legally protected factor, including but not limited to, gender, race, color, sexual orientation, citizenship, national origin, religion, status as a disabled veteran, Vietnam veteran or other veteran, pregnancy, exercise of legally protected rights, age, or any disability which Drury can reasonably accommodate without undue hardship and which does not create a direct threat to the person or other person in the recruitment and admission of students, the recruitment and employment of faculty and staff, and the operations of any of its programs and activities as required by federal, state, and local laws and regulations. Any person having inquiries concerning Drury University's compliance with the institution's efforts to comply with the regulations implementing Title VI, Title IX and Section 504 is directed to contact 900 North Benton, Springfield, Missouri 65802, 417-873-7527. Scotti Siebert has been designated by Drury University to coordinate the institution's efforts to comply with the regulations implementing Title VI, Title IX and Section 504. Any person may also contact the Assistant Secretary for Civil Rights, US Department of Education, regarding Title VI, Title IX and Section 504.

Educational background

Graduate degree _____ Institution _____ Year conferred _____

Area of specialty _____

Graduate degree _____ Institution _____ Year conferred _____

Area of specialty _____

Undergraduate degree _____ Institution _____ Year conferred _____

Area of specialty _____

Other institutions attended: Institution _____ Year(s) attended _____

Institution _____ Year(s) attended _____

Professional certifications

PLEASE PROVIDE US WITH COPIES OF CERTIFICATES YOU HOLD APPLICABLE TO YOUR TEACHING

Type _____ Term _____ Certificate # _____

Issuing Organization _____

Type _____ Term _____ Certificate # _____

Issuing Organization _____

Teaching experience

Course Title

School

Term

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Are you interested in teaching: online classroom both

Do you have experience teaching in an online delivery method? Yes No

Are you available to teach: during the day in the evening both day and evening

Other related experience

Professional references

Name _____ Company _____ Telephone _____ - _____ - _____

E-mail _____ Title _____

Name _____ Company _____ Telephone _____ - _____ - _____

E-mail _____ Title _____

Courses you feel qualified to teach

REFER TO THE DRURY UNIVERSITY CATALOG FOR EXACT COURSE INFORMATION
at www.drury.edu/cgcs/catalogs/undergrad.pdf or www.drury.edu/academics

Note: Complete course information is required in order to obtain approval to teach

Department _____ Course Number _____

Course Title _____

Department _____ Course Number _____

Course Title _____

Department _____ Course Number _____

Course Title _____

Department _____ Course Number _____

Course Title _____

Department _____ Course Number _____

Course Title _____

Department _____ Course Number _____

Course Title _____

Department _____ Course Number _____

Course Title _____

Department _____ Course Number _____

Course Title _____

Department Chair Approval		Initial
<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Date: _____		
<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Date: _____		
<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Date: _____		
<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Date: _____		
<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Date: _____		
<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Date: _____		

Applicant's statement

1. Can you provide proof of eligibility to work in the U.S.? Yes No

2. Have you plead guilty or been convicted of a felony within the ten years preceding your application to Drury University? Yes No

If your answer is Yes, please provide us with the state and county or other jurisdiction or the plea or conviction, the felony to which you were convicted or to which you plead guilty, and the case number of the prosecution. You may also provide any additional factual information you feel would be helpful.

3. Are you capable, with or without reasonable accommodation, of performing the activities involved in the job or occupation for which you have applied? (Note: Do not answer this question unless you have been informed about the requirements of the job for which you are applying.)
 Yes No

I certify that answers given herein are complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer. I agree to provide official transcripts of my postsecondary degrees upon employment.

Signature _____ Date submitted _____

Adjunct faculty evaluation / Course approval

TO BE COMPLETED BY DRURY UNIVERSITY

Administrative interview

Comments _____

Rating: Excellent Good Fair Poor

Signature _____ Date _____

Department Chair

Comments _____

Approved

Denied

Rating: Excellent Good Fair Poor

Signature _____ Date _____

Department Chair

ADDITIONAL DEPARTMENT, AS NEEDED

Comments _____

Approved

Denied

Rating: Excellent Good Fair Poor

Signature _____ Date _____

Department Chair

ADDITIONAL DEPARTMENT, AS NEEDED

Comments _____

Approved

Denied

Rating: Excellent Good Fair Poor

Signature _____ Date _____

**Dean of Graduate and
Continuing Studies** (or)
 Dean of the College

Comments _____

Approved

Denied

Rating: Excellent Good Fair Poor

Signature _____ Date _____

Vice President For Academic Affairs

Comments _____

Approved

Denied

Rating: Excellent Good Fair Poor

Signature _____ Date _____

Phone contact with references

Call made by _____ Date _____

Reference name _____

Association with applicant _____

Comments _____

Call made by _____ Date _____

Reference name _____

Association with applicant _____

Comments _____