

Validation of Credentials for Full-time and Part-time Faculty Process

All new faculty are required to sign a background release form at the time of hire. It outlines the action that will be taken if there is any form of falsification on the application. As part of the orientation, new hires complete the on-line review of the Sullivan University System Faculty/Staff Manual which discusses this issue. Effective January 8, 2009, the Spencerian College Faculty job description that is signed at the time of hire clarifies that all degrees and coursework must be from a college that is accredited by an agency that is approved by the U.S. Department of Education. Prior to finalization of hiring, all colleges listed by potential faculty members will be checked on the Department of Education website to validate that the college is accredited by an agency approved by the Department of Education. This website validation will be printed and placed in the employee file, along with the official transcript, and initialed as being completed on the New Hire Checklist by the Human Resource Coordinator. All official transcripts must be mailed directly from the applicant's college to the Human Resource Coordinator.



Transcript Request

TO: Records Clerk or Registrar

Date: _____

The person listed below has been employed by Sullivan University System as a member of the faculty/staff. To complete his/her personnel records, we must have an official transcript on file. We are requesting that an official copy of the transcript be forwarded to Sullivan University system as soon as possible. The following information may be of help in locating the records of this individual. The release form has been signed by the employee to meet the Privacy Act of 1974.

Employee Name: _____
(Please print) (First) (Middle) (Maiden if applicable) (Last)

Approximate Dates of Attendance: From _____ To: _____

Please include all transcripts from your institution including those for the following degrees awarded:

(Degree) (Major) (Degree) (Major)

Social Security Number: _____ Birth Date: _____

I hereby give my permission for the release of my transcript of grades to Sullivan University System for the purpose of qualifying for employment by the University.

Signature: _____

Please send the transcript and this request form to:

Beverley Gooselaw
Spencerian College
4627 Dixie Hwy
Louisville, KY 40216