

## DATA SHEET FOR STAFF AND FACULTY MEMBERS

*Keep in personnel file at institution; <u>do not</u> send to council office The data sheet should be updated annually*  750 FIRST STREET, NE, SUITE 980 WASHINGTON, DC 20002-4241 TEL: (202) 336-6780 FAX: (202) 842-2593 WWW.ACICS.ORG

Name of Employee	Date of Employment	
Job Title	Full-time or Part-time	

## **EDUCATION INFORMATION**

List below all postsecondary education, beginning with the most recent.

Name of Institution	Location	Major	Degree and Date Received	Dates Attended

List below any certificate(s) or license(s) now held.

Name of Certificate/License	Name of Provider	Date Received	Expiration Date

## **EMPLOYMENT INFORMATION**

List each position you have held for the past ten years, beginning with the **most recent**.

Name of Employer	Title	Nature of Duties	Dates Employed



## INSTRUCTION/ADMINISTRATION INFORMATION

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*List your typical duties for a week. List all classes taught and other duties performed, indicating the number of hours spent doing each (D=day, e=evening (please circle)).* 

Subject Taught or Duty Performed	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

What percentage of your working time has been spent during the past month in:

Teaching Administration Counsel	ing Field Work	Other (explain)
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**PROFESSIONAL DEVELOPMENT INFORMATION** (for administrators) Faculty should all have faculty development plans with supporting documentation in their personnel files.

- Names, dates, and locations of methods courses or workshops attended in the past three years.
- Names, dates, and locations of conventions or educational meetings attended during the past three years.
- Organization and/or professional societies (related to your present position), in which you now hold membership.
- List visits made to prospective employers of your students, businesses, other schools, and/or related organizations during the past year.

I CERTIFY THAT THE ABOVE STATEMENTS ARE TRUE, TO THE BEST OF MY KNOWLEDGE.

Signature of Staff Member