



915 S. Mooney Boulevard, Room 410
Visalia, CA 93277
Office: (559) 730.3776
Fax: (559) 730.3997
WEB site: www.cos.edu

Dear Applicant:

Your interest in a faculty or administrative position at College of the Sequoias is very much appreciated. COS is an equal opportunity employer and welcomes applications from all qualified individuals. For **each position** for which you are applying, make certain you read the job announcement and follow the specific instructions.

1. Incomplete application packets will **not** be considered. To ensure that your application packet will be complete, letters of recommendation should be submitted as part of the packet.
2. Letters of recommendation and transcripts that are sent under separate cover should include your full name and the position for which you are applying. The materials should be sent to COS.
3. Complete the application carefully, neatly and completely. Do not write "See Resume". COS has the application on its WEB site, and you may download the application and fill it out.
4. Please do not submit original documents if you need them returned or if you will need them in the future. Application materials cannot be returned.
5. COS must receive all application materials by the announced deadline date. **Applications will not be accepted past the deadline.**
6. A selection committee will review and evaluate applications to select a limited number of candidates to be interviewed. Meeting the minimum qualifications for a position **does not assure the candidate an interview.** Interview expenses will be borne by the candidate.
7. Applications will not be accepted unless there is an announced vacancy.

Your following the guidelines outlined and in the job announcement will enable your papers to be forwarded to the appropriate hiring committee for its consideration and review. Your cooperation is appreciated.

Please feel free to contact COS Human Resources if you need further information.



Application for Academic or Administrative Positions

General Information:

Position applied for			
<input type="checkbox"/> Administrative	<input type="checkbox"/> Regular / Faculty / (Full-Time)	<input type="checkbox"/> Adjunct Faculty (Part-Time)	
Do you meet minimum qualifications as outlined within job flyer for this position? <input type="checkbox"/> Yes <input type="checkbox"/> No	If no, please submit equivalency paperwork along with your application. If you have any questions about the equivalency process, please contact Human Resources.		

Personal Information:

Name:								
	Last	First	Middle	Other Name(s) Used: ↑				
Address:								-
	Number and Street			City		State		Zip
Telephone (Day)	()	-	E-Mail Address ↓					
Telephone (Evening)	()	-						

Education: (List in reverse chronological order)

Name of Institution	Location City/State	Date Diploma Degree Received	Major	Total Units Completed	
				Semester	Quarter
Total number of semester/quarter units completed after receipt of bachelor's degree					
Total number of semester/quarter units earned after master's degree					

California Community College Credentials:

Type of Credential	Authorized Subjects	Expiration Date

Other Professional Credentials, Certificates and Licenses:

Type Presently Held	ID Number	Expiration Date

Teaching Preparation: Indicate in order of preference the subjects you are prepared to teach according to your qualifications.

1.		2.	
3.		4.	

Employment History: List your occupational and teaching experience for the last 15 years, listing most recent employment first. Provide your complete employment history **even if you attach a resume**. If you had more than one position with the same employer, list each position separately. If more space is needed, continue on a blank sheet of paper using the same format. Please explain gaps in employment.

Position				Employer			
Supervisor				Supervisor Title			
Address							–
	Number and Street			City	State	ZIP	
Telephone	()	–		<input type="checkbox"/> Full-Time		<input type="checkbox"/> Part-Time	
Start Date				End Date			
Duties or Subjects Taught							
If instructional position, number of credits taught/year						<input type="checkbox"/> Semester	<input type="checkbox"/> Quarter
Reason for leaving							
Position				Employer			
Supervisor				Supervisor Title			
Address							–
	Number and Street			City	State	ZIP	
Telephone	()	–		<input type="checkbox"/> Full-Time		<input type="checkbox"/> Part-Time	
Start Date				End Date			
Duties or Subjects Taught							
If instructional position, number of credits taught/year						<input type="checkbox"/> Semester	<input type="checkbox"/> Quarter
Reason for leaving							
Position				Employer			
Supervisor				Supervisor Title			
Address							–
	Number and Street			City	State	ZIP	
Telephone	()	–		<input type="checkbox"/> Full-Time		<input type="checkbox"/> Part-Time	
Start Date				End Date			
Duties or Subjects Taught							
If instructional position, number of credits taught/year						<input type="checkbox"/> Semester	<input type="checkbox"/> Quarter
Reason for leaving							
Position				Employer			
Supervisor				Supervisor Title			
Address							–
	Number and Street			City	State	ZIP	
Telephone	()	–		<input type="checkbox"/> Full-Time		<input type="checkbox"/> Part-Time	
Start Date				End Date			
Duties or Subjects Taught							
If instructional position, number of credits taught/year						<input type="checkbox"/> Semester	<input type="checkbox"/> Quarter
Reason for leaving							

During the selection process, we may conduct reference checks with employers and supervisors listed above as well as others. If you do not want a certain employer or supervisor contacted initially, indicate **who** and **why**.

Professional References: List persons who can critically assess your work **qualifications** and job performance. This is not a substitute for required reference letters.

Name		Name	
Position		Position	
Company/Organization		Company/Organization	
Street Address		Street Address	
City / State / Zip		City / State / Zip	
Telephone	() -	Telephone	() -
Name		Name	
Position		Position	
Company/Organization		Company/Organization	
Street Address		Street Address	
City / State / Zip		City / State / Zip	
Telephone	() -	Telephone	() -

Foreign Languages:

Speak		Write	
Read		Fluency	<input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Fair

List professional trade, business, or civic activities and offices held. You may exclude those, which indicate race, color, religion, national origin, veteran status, ancestry, sex, sexual orientation, age, or disability.

Organization	
Activities	
Organization	
Activities	
Organization	
Activities	
Organization	
Activities	

Upon submission, this application and all supporting documents become the property of COS and will not be returned.

Certification: I hereby certify that all statements made on this application and any attachments are true and complete to the best of my knowledge. I understand that any false, incomplete or incorrect statement may result in my dismissal from employment with COS.

Unless noted above, I authorize COS to investigate my references, work record, education, performance evaluations or any other matters relating to my suitability for employment. I authorize and direct my former or current employers and educational institutions to release to the District any information they may have concerning my employment or education. I also authorize the District to obtain and review any documents or records, including driving records, which are applicable to my employment. I release the parties listed above from any and all liability related to this process of supplying or gathering any information about my suitability for employment.

I also understand that an incomplete application may delay or prevent employment opportunities with COS. I hereby release COS from any liability or damage which may result from providing or using the information requested.

Today's Date→	
Print your Name→	
*Applicant's Signature→	

CONFIDENTIAL

THIS SUPPLEMENTAL INFORMATION IS FOR THE USE OF THE HUMAN RESOURCES OFFICE ONLY

General Information:

	Yes	No
<ul style="list-style-type: none"> Are you able, upon employment, to submit verification that you are a United States citizen or are eligible to work in the United States: The Immigration Reform and Control Act of 1986 requires the College to obtain original documentation from every employee which verifies identity and authorizes employment in the United States. 	<input type="checkbox"/>	<input type="checkbox"/>
<ul style="list-style-type: none"> Have you ever been convicted, pled guilty to or pled no contest to any criminal offense by any court? (Having a criminal record does not necessarily disqualify you for employment. Each case is given individual consideration, based on job-related criteria. Attach additional pages to record the necessary information. If yes, please note the date and place of each offense, the specific charge, the date and place of conviction, or plea, the fine or sentence received or the diversion program entered. You may omit any offense for which the only punishment imposed was a fine of less than \$100. <i>Any offense for which you were convicted for which the punishment was a fine in excess of \$100, which required serving a jail or prison sentence, or which required probation MUST be reported.</i> 	<input type="checkbox"/>	<input type="checkbox"/>
<ul style="list-style-type: none"> Have you ever been dismissed from employment or resigned in lieu of being dismissed for inefficiency, delinquency, or misconduct? If "yes" explain below.* A yes answer will not automatically preclude you from employment consideration. 	<input type="checkbox"/>	<input type="checkbox"/>
<ul style="list-style-type: none"> The College is hereby authorized to contact my present employer. 	<input type="checkbox"/>	<input type="checkbox"/>
<ul style="list-style-type: none"> The College is hereby authorized to contact my past employers. 	<input type="checkbox"/>	<input type="checkbox"/>
<ul style="list-style-type: none"> The College is hereby authorized to contact other references. Any exceptions have been noted on page 2. 	<input type="checkbox"/>	<input type="checkbox"/>
<ul style="list-style-type: none"> Have you ever been employed by or does the College currently employ you? 	<input type="checkbox"/>	<input type="checkbox"/>
Date of Employment		
Position(s)		
Area / Lab / Department		
<ul style="list-style-type: none"> Does the College employ a relative of yours? If "yes" give name and relationship below.* 	<input type="checkbox"/>	<input type="checkbox"/>
*Remarks/Explanations: (Add additional pages as needed.)		

Certification and Agreement of Applicant: *Please read carefully before signing.*

Upon submission, this application and all supporting documents become the property of COS and will not be returned.

Certification: I hereby certify that all statements made on this application and any attachments are true and complete to the best of my knowledge. I understand that any false, incomplete or incorrect statement may result in my dismissal from employment with COS.

Unless noted above, I authorize COS to investigate my references, work record, education, performance evaluations or any other matters relating to my suitability for employment. I authorize and direct my former or current employers and educational institutions to release to the District any information they may have concerning my employment or education. I also authorize the District to obtain and review any documents or records, including driving records, which are applicable to my employment. I release the parties listed above from any and all liability related to this process of supplying or gathering any information about my suitability for employment.

I also understand that an incomplete application may delay or prevent employment opportunities with COS. I hereby release COS from any liability or damage which may result from providing or using the information requested.

Today's Date→	
Print your Name→	
*Applicant's Signature→	

Diversity Statement:

On a separate sheet of paper or in the space below, provide a statement about yourself that specifically demonstrates sensitivity to the needs of the diverse academic, socioeconomic, cultural, disability and ethnic backgrounds of community college students and the community at large. Your response is limited to one (1) page.

Applicant's Name:	
Position Applied for:	
Date:	

CONFIDENTIAL

THIS SUPPLEMENTAL INFORMATION IS FOR THE USE OF THE HUMAN RESOURCES OFFICE ONLY

As an affirmative action/equal opportunity employer, we are required to compile summary data on applicants for employment. We are requesting your assistance in providing the information below. Please return this form with your application. The completion of this questionnaire is voluntary on your part. The form will be kept confidential and separate from all hiring documents and will not be forwarded to the colleges/departments making employment decisions.

Name:		Date:	
Position applied for:		<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time

Personal:	<input type="checkbox"/> Male	<input type="checkbox"/> Female	Over 40 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Are you a person with a disability? <input type="checkbox"/> Yes <input type="checkbox"/> No		*As defined in the Americans with Disabilities Act of 1990, a disabled person is one who: (1) Has a physical or mental impairment which substantially limits one or more major life activities; (2) Has a record of such an impairment; or (3) Is regarded as having such an impairment.
If yes, do you need any accommodation(s)? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<i>If yes, please contact the College where you are applying for services. Individual phone numbers are provided on Page 1 of this application.</i>			

Are you Hispanic or Latino?	<input type="checkbox"/> NOT Hispanic or Latino	<input type="checkbox"/> Hispanic or Latino	<input type="checkbox"/> None
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What is your race/ethnicity? (Choose one or more)	<input type="checkbox"/> Mexican, Mexican-American, Chicano	<input type="checkbox"/> Asian: Korean	<input type="checkbox"/> American Indian/Alaskan Native
	<input type="checkbox"/> Central American	<input type="checkbox"/> Asian: Laotian	<input type="checkbox"/> Pacific Islander: Guamanian
	<input type="checkbox"/> South American	<input type="checkbox"/> Asian: Cambodian	<input type="checkbox"/> Pacific Islander: Hawaiian
	<input type="checkbox"/> Hispanic: Other	<input type="checkbox"/> Asian: Vietnamese	<input type="checkbox"/> Pacific Islander: Samoan
	<input type="checkbox"/> Asian: Indian	<input type="checkbox"/> Filipino	<input type="checkbox"/> Pacific Islander: Other
	<input type="checkbox"/> Asian: Chinese	<input type="checkbox"/> Asian: Other	<input type="checkbox"/> White
	<input type="checkbox"/> Asian: Japanese	<input type="checkbox"/> Black or African American	

Status:	<input type="checkbox"/> Veteran	<input type="checkbox"/> US Citizen
	<input type="checkbox"/> Vietnam Veteran	<input type="checkbox"/> Permanent Resident

Recruitment Information:	How did you hear about this position/job?
<input type="checkbox"/> Chronicle of Higher Education <input type="checkbox"/> District flyer <input type="checkbox"/> Friend <input type="checkbox"/> Referral <input type="checkbox"/> Walk in to HR/Personnel Office of College	<input type="checkbox"/> Chancellor's Registry <input type="checkbox"/> District Telephone Job Line <input type="checkbox"/> Graduate department <input type="checkbox"/> Word of Mouth
<input type="checkbox"/> Internet (please specify WEB address)	_____
<input type="checkbox"/> Job Fair (please identify location)	_____
<input type="checkbox"/> Journal or other discipline publication (please identify)	_____
<input type="checkbox"/> Local Publication(s) (please identify)	_____
<input type="checkbox"/> Other (please indicate source).....	_____

We appreciate your assistance in providing statistics to help us improve our recruitment efforts.

Declaration

I declare that I have read and understood all of the questions and statements listed above and the answers I have given are true and correct.

I decline to complete this form

Print Name _____

Signature _____

Date _____

Equivalency Policy**Minimum Qualifications for Faculty**

The minimum qualifications for service as a College of the Sequoias faculty member teaching any credit course, or as a counselor or librarian, shall be satisfied by meeting any one of the following requirements:

In disciplines normally requiring an M.A./M.S., one of the following must be satisfied:

1. Possession of a master's degree (or equivalent foreign degree) in the discipline of the faculty member's assignment.
2. Possession of a master's degree (or equivalent foreign degree) in a discipline reasonably related to the faculty member's assignment (as determined by the State Chancellor's Office minimum qualifications document) and possession of a bachelor's degree in the discipline of the faculty member's assignment.

In disciplines where the master's degree is not generally expected or available (specialized technical, trade or industrial fields), one of the following must be satisfied:

1. Possession of a bachelor's degree plus two years of professional experience directly related to the faculty member's assignment; or
2. Possession of an associate degree plus six years of professional experience, directly related to the faculty member's assignment.

Equivalent Qualifications for Faculty

Candidates not meeting these minimum qualifications may be determined equivalent by presenting the following criteria:

In disciplines **normally** requiring an M.A./M.S.

- B.A./B.S. plus 36 semester units or more (to be determined by the divisions) of graduate level coursework in the specific discipline from an accredited institution, **OR**
- B.A./B.S. plus licensure in the discipline from an accredited institution or entity, **OR**
- If a candidate is claiming eminence in the field or discipline, s/he must provide the equivalency committee with proof of such. Proof is defined as work experience and/or related accomplishments considered exemplary by noted/renowned experts in that field both in the regional area and on a state, or national, or international level.* These criteria are reflected in a questionnaire which must be completed by all candidates requesting equivalency based on eminence.

* Candidates seeking equivalency based on eminence in a **vocational education** program may be considered on a regional, or state, or national/international level.

In disciplines where the master's degree is **not** generally expected or available (specialized technical, trade, or industrial fields), one of the following **must** be satisfied:

- Coursework must be from an accredited institution or its equivalent so that the coursework, certificates, and/or workshops equal the AA/AS degree or BA/BS degree. Candidates seeking equivalency under this provision must also have the appropriate number of years of experience. (six years AA/AS and 2 years BA/BS)

OR

- If a candidate is claiming eminence in the field or discipline, s/he must provide the equivalency committee with proof of such. Proof is defined as work experience and/or related accomplishments considered exemplary by noted/renowned experts in that field both in the regional area and on a state, or national/international level.* These criteria are reflected in the Equivalency Questionnaire which must be completed by all candidates requesting equivalency based on eminence.

* Candidates seeking equivalency based on eminence in a **vocational education** program may be considered on a regional, **or** state, **or** national/international level.

Policies

1. Definitions of terms used in this policy:

Reasonably related: The definition of “reasonably related” is those courses within the discipline list as they appear in the Chancellor’s Office Discipline Lists [Title 5, Article 1, §53407(2)]

Eminence: Work experience and/or related accomplishments considered exemplary by noted/renowned experts in that field both in the regional area and on a state, or national, or international level.* These criteria are reflected in a questionnaire which must be completed by all candidates requesting equivalency based on eminence.

* Candidates seeking equivalency based on eminence in a **vocational education** program may be considered on a regional, or state, or national/international level.

2. Department responsibilities:

- Departments may choose to forward a candidate for either single course or full–subject matter equivalency.
- Departments may request approval of eminence as a qualification for equivalency.
- Departments may require more, but not less, than the minimum of 36 semester units or the equivalent of graduate level coursework for equivalency candidates. If divisions wish to require more than 36 units in a particular discipline, that division must inform the Equivalency Committee during the Fall semester of the academic year prior to the consideration of any equivalency candidates in that discipline.

- Departments determine what coursework should be acceptable in lieu of an M.A./M.S.
 - Departments will determine a timeline for currency of a candidate's experience.
 - For a candidate claiming equivalency, the three faculty who sign the document supporting the request for equivalency must also provide a paragraph or more of written justification in support of the candidate's claim for eminence.
3. Equivalency Committee
- The Equivalency Committee shall include the Academic Senate Vice President as chair and faculty members appointed by the Academic Senate. One additional faculty representative shall be appointed from the division recommending equivalency if that division does not already have a member serving on the Equivalency Committee.
 - All equivalency decisions are final.
 - The Equivalency Committee will review the applicant's materials including the Equivalency Questionnaire. The Equivalency Questionnaire will be rated for the strength of each item/response. Completion of the requested materials does not guarantee approval.
4. Criteria for seeking equivalency
- College of the Sequoias will not accept equivalency granted by another institution. Each candidate must fulfill the equivalency demands of COS.
 - These same criteria will apply for currently employed adjunct faculty seeking equivalency in another discipline as well as new applicants.
 - Foreign degree equivalency will be determined by one of the six regional accrediting agencies recognized by the Council on Post Secondary Accreditation. All foreign college and university degrees must be evaluated to ensure the educational background is equivalent to U.S. degrees or credits. Therefore, foreign degree holders will be referred to the Chancellor's Office for California Community Colleges, Credentials Evaluation Service for confirmation of the degree's equivalency. The expense of this evaluation is the responsibility of the applicant.
 - Candidates who are not yet finished with their degree programs will be encouraged to apply under the internship programs rather than seeking equivalency.
 - A candidate may reapply no more than three times and only if the new application contains significant additions.
 - Equivalency questionnaires are to be included in the application packet for instructors at College of the Sequoias.

Ref: AB 1725
Adopted: June 16, 1997
Revised: June 19, 2000 / December 10, 2001

EQUIVALENCY QUESTIONNAIRE
FOR
ACADEMIC PROGRAM POSITIONS

DIRECTIONS: Provide as much explanation and supportive documentation as possible in answering the following questions. Please do not simply answer “yes” or “no” without providing background information. Eminence is granted rarely (only to those who are truly qualified) and must be supported with documentation requested in the questionnaire. Your answers may be written on a separate document.

1. Are you requesting “full” or “partial” equivalency?
Full = Right to teach all classes in a department/field;
Partial = Right to teach only one class/topic area in a department/field.
2. Specify the classes you are seeking to teach and indicate whether you are seeking equivalency based on “eminence.”

If based on eminence, please read the complete policy on eminence then answer the following questions and provide supporting documentation.

If your request is not based on eminence, explain why you feel you meet the other criteria for equivalency.

Questions 3 through 10 of the questionnaire must be completed only by those candidates seeking equivalency based on eminence.

3. Are you recognized as “eminent” by experts in your field?
Specify who these references are and provide a letter from each of at least three (3) of these individuals. None of the reference letters may be from the same three faculty members who signed the divisional support document and provided justification paragraphs for your application.
4. Have you had any teaching and training experience in your field? Specify/provide proof.
5. Have you ever been invited to present/lecture/speak/perform at a conference or other event? Specify and provide documentation.
6. Have you ever published, recorded, exhibited, or performed in your field? Specify.
7. Have you ever received an award in your field? Was this award from an accredited institution? Specify.
8. Have you ever been awarded an honorary degree in your field? Specify.
9. Have you ever served in relevant leadership positions in your field at the local, state or national level? Specify.
10. Is there anything else you would like the committee to consider in your bid for equivalency based on eminence that was not covered in this questionnaire?
Please include any additional qualifications you feel you have exhibited in your field.

EQUIVALENCY QUESTIONNAIRE
FOR
VOCATIONAL EDUCATION PROGRAMS

DIRECTIONS: Provide as much explanation and supportive documentation as possible in answering the following questions. Please do not simply answer “yes” or “no” without providing background information. Eminence is granted rarely (only to those who are truly qualified) and must be supported with documentation requested in the questionnaire. Your answers may be written on a separate document.

1. Are you requesting “full” or “partial” equivalency?
Full = Right to teach all classes in a department/field;
Partial = Right to teach only one class/topic area in a department/field.
2. Specify the classes you are seeking to teach and indicate whether you are seeking equivalency based on “eminence.”

If you are seeking equivalency based on eminence, please read the complete policy on eminence then complete the rest of this questionnaire.

Questions 3 through 10 of the questionnaire must be completed only by those candidates seeking equivalency based on eminence.

3. Are you recognized as an expert in your vocational field?
Include three letters of recommendation which indicate **why** you are considered an expert in your field. These individuals must **not** be the same three faculty who signed the COS Division support document with justification paragraphs.
4. Have you had any teaching experience in your vocational field? Please provide documentation.
5. Have you ever presented your vocational expertise on an industry level? Specify.
6. Have you ever written or been involved in the publication of technical manuals in your vocational field? Please specify and provide examples.
7. Have you ever been recognized by your vocational industry as an expert in your field? Specify and provide documentation.
8. Do you have any formal industry or technical school training or certification/license in your area of expertise? Specify and provide documentation.
9. Have you ever served in a supervisory position in your vocational field? Specify.
10. Is there anything else you would like the committee to consider in your request for equivalency based on eminence that was not covered by this questionnaire?