

INSTRUCTIONAL STAFF FORM FOR PERSONNEL HIRED SINCE PREVIOUS SCHOOL APPROVAL

No instructional staff have been hired since the previous school approval application was submitted.

*This form shall be completed for all **instructional staff (includes teaching assistants)**, and shall be accompanied by the following documentation, in the form of photocopies:*

- Certifications, diplomas or degrees from professional training programs (including teacher training), and post-secondary institutions (colleges or universities)
 - Official transcripts from professional training programs and post-secondary institutions
 - Documentation of National Certification; State Licensure (as applicable)
 - Professional association membership; awards in the field
- (Note: A resumé may be submitted as a supplement to this form, but not as a substitute.)**

1. Name of Institution _____
2. Name of Instructor _____
 Residence Address _____
 City, State, Zip _____
 Res. Phone _____ Email (optional) _____
3. Position/Title _____
 Date Hired _____ # of Hours Worked per Week _____
 Employee (or) Independent Contractor
4. Name and Title of Supervisor _____
5. Course(s) Taught _____
6. Other Responsibilities _____
7. Number of years of practical experience in the subject area you teach _____
8. Number of years of teaching experience:
 - a. In the field of massage and bodywork therapy _____
 - b. In other disciplines _____
9. State or National Credentials:

Name of State Agency or National Certification Board	Certification, License or Registration	Held Since	Expiration Date

10. Education: List both high school and colleges attended. Indicate type of credentials earned.

Educational Institution: Name, City and State	Area of Study	Dates Attended	Diploma or Title of Degree Conferred

11. Professional Training: List programs taken, especially in areas related to current position.

Program Title; Number of Hours; City and State	Name of School or Presenter	Dates Attended	Credential Earned

12. Practical Experience: Starting with your present position, list practical experience related to your subject area. You may attach a resumé as documentation.

Date (month/year) From...To	Name and Address of Employer or Location Address if Self-Employed	Job Title, Average Hours per Week

13. Teaching Experience: Starting with your present position, list all professional teaching experience. You may attach a resumé as documentation.

Date (month/year) From...To	Name and Address of Employer or Location Address if Self-Employed	Job Title, Average Hours per Week

14. Teacher Training: List specific courses or programs taken in teaching and include the course outlines and learning objectives. A certificate of completion for all courses taken should be included also. Required topics included in teacher training courses/programs are presentational skills, development and implementation of lesson plans, dynamics of the teacher/student relationship, management of the classroom environment, evaluation of student performance, instructional strategies for the adult learner, accommodations for students with special needs, and knowledge of the school's administrative policies and procedures.

Course or Program Title; Number of Hours; City and State	Name of School or Presenter	Dates Attended	Credential Earned

15. Attach a list of continuing education courses or other professional development activities.

16. List Professional Memberships and Affiliations.

17. List Special Recognition or Awards granted in your field.

I hereby certify that the information shown on this form and attached documentation are true, correct and complete, to the best of my knowledge.

Signature

Printed Name

Date