

Ferris State University Seminar (FSUS) Instructor Application

**Please submit a resume with this application to the FSUS program office.

Name _____ Date _____

SSN _____ Department _____

Office Location _____ Mail Drop _____

Office Phone _____ Home Phone _____

Home Address _____

E-mail _____

I am professionally classified as:

Faculty full-time adjunct

Staff full-time part-time

Administration full-time part-time

Not currently employed/affiliated with the University

Position Title: _____

Highest degree attained/field: _____

Direct Supervisor: _____

College Dean: _____

My department chair/supervisor has approved me to teach FSUS Yes No NA

Have you had prior teaching experience in a freshman seminar course? Yes No

If Yes, at what institution? _____

I understand my Dean/Division Administrator will be asked to approve my inclusion in and payment for this program.

Signature

Date