

PARKSIDE ACCESS TO COLLEGE CREDITS PROGRAM HIGH SCHOOL FACULTY APPLICATION

Personal Information				
Last Name:	First Name:	Middle Initial:	Social Security #:	Gender: Female <input type="checkbox"/> Male <input type="checkbox"/>
Current Mailing Address:		Personal Phone:	Date of Birth (MM/DD/YYYY):	
Primary Language:	Other Language:			

Educational Information				
Degree	Institution	Degree Year	Major	Minor

Professional Information			
High School:	School Phone w/ ext:	Principal:	
School Mailing Address:		School Phone with Ext:	
Current Subject you are teaching:			
Current Courses you are teaching:			
Total years teaching experience:	Years in High School:	Years of Advanced Courses:	Years of College Courses:
DPI License Position/Subject Code 1:	DPI License Position/Subject Code 2:	DPI License Position/Subject Code 3:	DPI License Position/Subject Code 4:
DPI License Developmental Level:	DPI License Stage:	DPI License Expiration Date:	
Have you ever applied to teach a concurrent enrollment course for another institution of higher education? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, which college/university?			
Did you teach concurrent enrollment courses? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what courses did you teach?			
Have you been asked to discontinue involvement in a concurrent enrollment program? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain why.			
Signature:			Date:

Completed applications include this form, current resume and copies of official transcripts from your master's level work. Incomplete applications will not be considered for the PACC program.

Please send application materials to: PACC@uwp.edu or University of Wisconsin-Parkside, ATTN: CSSPS Dean's Office, 900 Wood Road, Kenosha, WI 53144.