DATE

INSIDE ADDRESS

Xxxx

Xxxx

Dear Name of Adjunct:

We are interested in considering you for an opportunity for adjunct teaching for (list semester and course). Please complete the attached Adjunct Pre-Employment Checklist and return to the name and address listed at the bottom of the form as soon as possible.

As part of Minnesota State University, Mankato’s compliance with the Higher Learning Commission (HLC) faculty qualifications assurance process, we need to make sure we have a copy of your current resume/CV and your unofficial transcript showing your highest relevant degree(s). If you have not already provided us with that, **please do so at your earliest opportunity**. If selected for the position, you will be required to submit your Official transcript(s) to Human Resources (unless one is already on file).

Thank you.

Sincerely yours,

Name

Title

**Minnesota State University, Mankato**

**Adjunct Pre-Employment Checklist**

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

College\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Department\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Course number and name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fall Semester Spring Semester Summer Session

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\* Please answer the questions below and sign.

 Please indicate if you are currently employed as an adjunct instructor by another MSU department or another Minnesota State institution.

No

Yes Fall Semester Spring Semester Summer

If yes, please identify the institution and the number of credits you are teaching:

 Please indicate if you currently work for or have been offered employment for another MSU department.

No

Yes Fall Semester Spring Semester Summer

If yes, please identify the department:

 Please indicate if you are currently employed at or have been offered employment at another Minnesota State College & University or Minnesota state agency.

No

Yes Fall Semester Spring Semester Summer

If yes, please identify the agency and your position title:

 Please indicate if you work as an Independent Contractor with MSU or another Minnesota state agency.

No

Yes Fall Semester  Spring Semester Summer

If yes, please identify the agency and your position title:

Signature: Date:

Please return this form, your Resume/CV and Unofficial Transcript to:

Office of the Dean

College of Social and Behavioral Sciences Minnesota State University, Mankato Mankato, MN 56001