

Effective Through _____
(for office use only)

MASSACHUSETTS COLLEGE OF LIBERAL ARTS
Application to the Evening, Summer and Graduate Program Pool

Applications to the Evening, Summer and Graduate Program Pool may be submitted at any time during the calendar year. In order to be eligible for appointment, an individual shall have been included in this pool.

Name _____ Social Security # _____

Home Address: Street _____ Telephone _____

City _____ State _____ Zip _____

Business: Position _____

Organization _____

Street _____ Telephone _____

City _____ State _____ Zip _____

Are you a full-time faculty member at Massachusetts College of Liberal Arts? Yes / No

Discipline/Subject Areas of Expertise:

List subject areas or classes you are prepared to teach: _____

In order for your application to be processed, you must include the following:

(not required of faculty holding a full-time appointment at MCLA or for re-applicants)

Transcript: Arrange for transcript of highest degree earned to be sent directly to the Dean of Academic Affairs (**mandatory**).

_____ Transcript has been requested from _____
(name of institution)

Attachments: _____ Resume (**mandatory**)

Optionally, you may send the following:

_____ Teaching experience at institutions other than MCLA. List: all full and part-time appointments, with dates, and number of credit hours of instruction offered.

_____ Other documentation of professional or creative activities.

By signing below I certify that my transcript has been requested and is being forwarded to Massachusetts College of Liberal Arts, Dean of Academic Affairs and that my resume is attached. I understand that without this information my application for the Evening, Summer and Graduate Program Pool cannot be processed.

Signature _____ **Date** _____

Return to: **Dean of Academic Affairs, Eldridge Hall, Massachusetts College of Liberal Arts, North Adams, MA 01247**