



INSTRUCTOR INFORMATION

Divisions must submit the following information to the VPAA Office to enter or change instructor information in Banner. Please complete all sections and include all information requested.

Complete or check as appropriate:-----

Date ___/___/___ Purpose: Add ___ Update ___

Category: New Faculty ___ Current Faculty ___ Returning Faculty ___ GTRA ___

Banner ID Number _____ Social Security Number _____ Birth Date _____

Full Legal Name _____
Last First Middle

Academic Title _____

Division _____ Discipline _____ Percent of load ___%

Division _____ Discipline _____ Percent of load ___%

Activate Faculty Status ___yes ___no Activate Advisor Status ___yes ___no

Delete Faculty Status ___yes ___no Delete Advisor Status ___yes ___no

Full Time ___ Part-Time ___ Temporary ___ Tenure Track ___ Tenured ___

Original Appointment beginning date ___/___/___

Created on 7/13/05