



SAN DIEGO COMMUNITY COLLEGE DISTRICT
EQUIVALENCY COMMITTEE EVALUATION FORM

On this date, _____, the _____ Equivalency Committee evaluated the application of: _____, for a faculty assignment in the following discipline: _____ at _____ (Site).

The applicant has declared that s/he has an equivalency to the minimum qualifications (MQ's) for this discipline. The Equivalency Committee determined that the applicant has established an equivalency to the minimum qualifications for this discipline based on the following evidence:

Type of evidence presented (check all that apply and provide documentation):

- Transcripts, Certification(s), Publications, Professional experience, Other (please describe)

Empty rectangular box for providing documentation.

If conclusive evidence is based upon appropriate coursework, please list the specific courses that apply to this equivalency

Table with 2 columns: Course #, Course Title. Multiple empty rows for data entry.

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Discipline Equivalency Committee Members:

Signature lines for Discipline Equivalency Committee Members, including Name and Date fields.

Academic Senate Equivalency Committee Members:

Signature lines for Academic Senate Equivalency Committee Members, including Name and Date fields.