

**WEST LOS ANGELES COLLEGE  
APPLICATION FOR ADVANCEMENT IN ACADEMIC RANK**

**Applicant to complete sections A, B and D if applicable.**

**Personnel Operations Branch to verify section C.**

**SECTION A**

- A.1 \_\_\_\_\_  
Name (print) \_\_\_\_\_ Employee # \_\_\_\_\_
- A.2 Applying for rank of (Check one only):  
\_\_\_\_\_ Assistant \_\_\_\_\_ Associate \_\_\_\_\_ Professor \_\_\_\_\_ Emeritus
- A.3 In subject area of (list one only): \_\_\_\_\_
- A.4 Current academic rank \_\_\_\_\_
- A.5 \_\_\_\_\_  
Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_
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TO APPLICANT: Complete appropriate APPLICANT sections below, and mail to:  
WLAC Senate Vice President.

TO PERSONNEL OPERATIONS BRANCH:  
Please verify applicant's statements in section C and return to  
WLAC Senate Vice President

**SECTION B - FOR ALL APPLICANTS**

(Please list all dates by month and year)

- B.1 Date first hired as probationary faculty \_\_\_\_\_
- B.2 Date tenure granted or scheduled to be granted \_\_\_\_\_
- B.3 Major subject title (Math, English, etc.) \_\_\_\_\_
- B.4 Are you currently teaching that subject? For how long? \_\_\_\_\_  
\_\_\_\_\_
- B.5 Your degree(s) and/or subject areas of credential(s) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- B.6 Teaching experience in LACCD: \_\_\_\_\_ years  
From: \_\_\_\_\_ to \_\_\_\_\_
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**SECTION C - ADDITIONAL DATA FROM APPLICANT FOR THE RANK OF PROFESSOR ONLY.**

- C.1 If applying under “five years of full-time service as an Associate Professor”, give the date when associate professor designation was granted. \_\_\_\_\_
- C.2 If applying under “five years of full-time service as a professional in industry”, attach a list of your employers, and additional information as described below.

Note: The employment must be verified. If Personnel Operations cannot verify, you must get statements from former employers.

Employer’s Name & Address

Dates From / To

- Professional Title
- If professional title is not reasonably descriptive, add a short explanation of the nature of duties and responsibilities

(Complete only ONE from C.3 through C.7 below)

- C.3 Number of college units beyond 120 unit bachelor’s degree \_\_\_\_\_
- C.4 Professional certification by the State (if you have only a bachelor’s degree) \_\_\_\_\_
- C.5 Earned doctorate (Include subject and institution) \_\_\_\_\_
- C.6 National eminence and / or community service. Attach statement.
- C.7 Vocational Experience (minimum of 90 in-service training points). Attach statement.

\*\* For use by District Personnel Operations Branch Representative

Verified: C1\_\_\_ C2 \_\_\_ C3 \_\_\_ C4 \_\_\_ C5 \_\_\_ C6 \_\_\_ C7 \_\_\_

By:

\_\_\_\_\_ Date \_\_\_\_\_  
Signature of authorized LACCD Personnel Operations Branch Representative

**SECTION D – ADDITIONAL DATA FOR EMERITUS STATUS ONLY**

D.1. Discipline or service area requested for Emeritus Status (List only one.)  
\_\_\_\_\_

D.2. Status to be conferred based upon (check and submit information on all that applies):

\_\_\_ a) Significant publication in your field of instruction / service.

\_\_\_ b) Significant sponsorship of student activities.

\_\_\_ c) Significant service on committees related to academic governance.  
Committee name: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_ d) Eminence in area of instruction / service.

\_\_\_ e) General recognition by the academic community of having served as an unusually capable educator.

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**SECTION E – FOR USE BY WLAC ACADEMIC RANK COMMITTEE**

Approved ( )

Disapproved ( )

Rank \_\_\_\_\_

In the filed of \_\_\_\_\_

Signatures of 3 committee members plus the Senate Vice President:

Sign \_\_\_\_\_

Sign \_\_\_\_\_

Sign \_\_\_\_\_

Sign \_\_\_\_\_ (Senate Vice Pres.)

Date \_\_\_\_\_

Applicant Notified On: Date \_\_\_\_\_

Certificate of Rank Issued on: Date \_\_\_\_\_