FULL-TIME FACULTY EMPLOYMENT DATA SHEET

Academic Affairs

ILL NAME			CHOOL/ OLLEGE		
PARTMENT			MSU OFFICE	PHONE	
CAL ADDRESS	(If no local ad	dress, use most current address.)	LC	OCAL PHONE	
TH DATE/	/ E	THNICITY SE	X MSU EMPLOYMENT	START DATE	
NTRACT LENG	TH: Academic \	'ear O Fiscal Year O (Other S	ALARY	
			Associate Professor	Professor O	
Visiting __			_		
MINISTRATIVE '	TITLE (ex. dean	chair, etc.)		-	
GREES EARN	ED				
BACHELORS					
Degree	Date	Institution	Subje	ct	
MASTER'S					
Degree	Date	Institution	Subje	Subject	
Degree	Date	Institution	Subje	ct	
DOCTORATE	:				
Degree	Date	 Institution	Subje	ct	
CERTIFICATI	ON				
Certification		Date Institution		Subject	