

BANNER FACULTY INFORMATION

Instructions: Discipline must be included on new forms. If update, enter only SSN/Banner ID, Name and change.

Please highlight change.

SSN/BANNER ID

New ___ Update ___

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NAME: _____
(LAST, FIRST MIDDLE)

STARTING TERM: _____ **YEAR:** _____ **FT** _____ **PT** _____

GENDER: _____ **DOB:** _____
MM/DD/YY

TENURE: _____

RANK: If Change, effective Semester _____ and Year _____

Teaching Discipline: _____

COLLEGE: _____ **DEPARTMENT:** _____

EARNED DEGREE	FROM	DATE CONFERRED
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

DEGREE IN PROGRESS	FROM	EXPECTED DATE
_____	_____	_____

COMMENTS: _____

FORM COMPLETED BY: _____ **DATE:** _____

*****FOR IR USE ONLY*****

Date entered on Banner: _____ By: _____

Banner ID: _____