Indiana Board for Proprietary Education

INSTRUCTOR’S QUALIFICATION RECORD

**Instructions**: Include all training/education applicable to current teaching assignments. This form will not be processed unless all supportive documentation required for review has been attached with this form (i.e., transcripts identifying the precise nature of previous work and teaching experience, signed by a former direct supervisor.)

*Please type the form.*

*Use the <tab> key to advance to the next field, or select a field by clicking the cursor.*

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Name: (Last) (First) (Middle)

Names of Courses Taught:

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| **Source of****Training/Education** | **Location** | **Area or Subject of****Training/Education** | **Period of Attendance** |
| **From:** | **To:** |
|  |  |  |  |  |
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|  |  |  |  |  |
|  |  |  |  |  |
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| **Applicable****Experience** | **Location** | **Exact Nature of****Experience** | **Employment Period** |
| **From:** | **To:** |
|  |  |  |  |  |
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