CHABOT-LAS POSITAS COMMUNITY COLLEGE DISTRICT
Office of Human Resources
Faculty Service Area (FSA) Record Form

February 15 deadline to submit to OAS / OSS

(Please Print)

Date: ____/____/____ Location: ☐ Chabot College ☐ Las Positas College

Employee Name: _____ SSN/W# _____

Year hired: _____ Original discipline: _____

Discipline(s) currently assigned: _____

_____

This form follows the sequence of the faculty contract, article 22. (Faculty service areas)

1. My M.A. or other advanced degree(s) qualify me for FSA(s) in :

_____

_____

_____

2. My subject matter area credential(s) qualify(ies) me for FSA in:

_____

_____

_____

3. On the basis of an equivalency assigned in this District (date, cite supporting documentation), I qualify for FSA(s) in the following disciplines:

a._____

b._____

c._____

4. In addition to the M.A degree(s), I have completed 24 semester units, of which 12 are upper division / graduate level units, qualifying me for FSA(s) in:

_____

_____

Coursework not recorded in my personal file qualifies me in _____ discipline(s).

(please submit official transcripts)

For counselors / librarians

5. I qualify for FSA(s) in: _____ because I have performed in the District 20% of the hours per week indicated for a full load for three semesters.

6. I teach in (a) discipline(s) which does/do not require a M.A. degree. I have the combination of degree and work experience as stipulated in the guide to subject matter areas for Community College credentials in:

Discipline	Degree(s) / License No.	Work experience, dates
1.		
2.		
3.		
4.		

Please retain copy for your records and submit original to Human Resources.

Reference: Article 22D.1, 22D.4 – Faculty Collective Bargaining Agreement