

University System of Georgia
UNIVERSITY OF NORTH GEORGIA
 Dahlonega, GA 30597

FACULTY INFORMATION

Please type or print all information.

Full Name:		SSN:	
Address:		City, State, Zip:	
Home Phone:	Work Phone:	Fax:	
Email:			
Birth Date:		Place of Birth:	
Citizenship Country:		Sex:	Race:
Academic Discipline(s):			
Position:			
Employment Date:			

COLLEGE AND PROFESSIONAL EDUCATION

Degree	Institution	Year	Major Field	Minor Field

PLEASE ATTACH A CURRENT CURRICULUM VITA TO INCLUDE:

- PROFESSIONAL WORK EXPERIENCE
- PUBLICATIONS AND/OR OTHER SCHOLARLY ACTIVITIES
- MEMBERSHIP IN PROFESSIONAL ORGANIZATIONS
- HONORS AND SPECIAL RECOGNITIONS

I swear (or affirm) under penalty of perjury that all representations made by me on this Faculty Information sheet, and/or my resume or curriculum vita are true and correct. I further understand that any misrepresentations of my credentials or any other fact on my application materials may result in immediate termination.

Signature

Date

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