



Shawnee Community College

Dual Credit Instructor Information

The purpose of this form is to collect the information needed for Shawnee Community College Human Resources to process and add new Dual Credit instructors to the College's systems. Please complete all sections of this form and submit it along with all other required documentation.

Last name: _____ First name: _____

MI: _____

Address: _____

City: _____ State: _____ Zip code: _____

Phone Number: _____

SSN: _____ Date of birth: _____

Sex: ☐ Male ☐ Female

Race/Ethnicity:

☐ American Indian or Alaska Native

☐ Middle Eastern or North African

☐ Asian

☐ Native Hawaiian or Pacific Islander

☐ Black or African American

☐ White

☐ Hispanic or Latino