RCCD | RIVERSIDE COMMUNITY COLLEGE DISTRICT

MORENO VALLEY COLLEGE | NORCO COLLEGE | RIVERSIDE CITY COLLEGE

ASSOCIATE FACULTY REQUEST FOR REEMPLOYMENT PREFERENCE FORM

Print Name:	Staff ID:
Phone:	Discipline:
Email:	Retiree: No Yes | Retirement Date:
Date of Hire:	Date of Rehire:

Full Time Faculty Retirees:

When rehired as a part-time associate faculty member retiree(s) who want to be considered for reemployment preference, must complete and submit the Associate Faculty Request for Reemployment Preference Form. Preference is given to full time faculty, who retire, for the first semester that they are eligible to teach. Retired faculty will be evaluated during the first semester serving as part time faculty and if they receive a satisfactory evaluation, they will be eligible to apply for preference and be considered on the three-year evaluation cycle.

I hereby request to be on the reemployment preference eligibility list for the following College location: MVC   NC   RCC

(If requesting preference for multiple colleges, a separate form must be completed for each College)

In support thereof, I certify that:

- I have taught at least 2.0 FTE per course listed (10 courses if 0.2 FTE)   Yes   No

- I have at least 1,215 non-instructional hours (Counselors/Librarian)   Yes   No

- I am on a Three-Year-Evaluation Cycle due to satisfactory evaluations
  which include peer evaluations and student evaluations (or equivalent)
  and possess a minimum of three evaluations for the course(s) requested
  for preference.   Yes   No

I am requesting Reemployment Preference for the following courses:

Course Taught (ex. ABC-1A)	Course Taught (ex. ABC-1A)	Course Taught (ex. ABC-1A)

Please sign and submit a copy of this completed form to your Dean. Please scan, and forward the original form, to the District Office of Human Resources and Employee Relations at Sinclair.Dickerson@rccd.edu. The request will be reviewed for verification, eligibility and inclusion on the Reemployment Preference list, pending approval. The results will be sent to you and your respective VP, Academic Affairs who will forward the status to your Dean.

Employee Name (Print/Sign) _____   Date: _____