

RANCHO SANTIAGO COMMUNITY COLLEGE DISTRICT

Request for Specific Equivalencies to Minimum Qualification for a Discipline/Program

FORM I

Each time a department wants to alter its agreed upon equivalencies for all discipline hirings, it must file a new "Request for Equivalencies to Minimum Qualifications" form.

Name of the Discipline: Automotive Technology

1) List the current Minimum Qualifications for the discipline:

Any Bachelor's Degree and two years of "professional experience" related to the subject matter of the course taught.

OR

Any Associate Degree and six years of "professional experience" related to the subject matter of the course taught.

2) List the equivalencies that the Department accepts as valid:

Any Bachelor's Degree and two years of "professional experience" related to the subject matter of the course taught.

OR

Any Associate Degree and six years of "professional experience" related to the subject matter of the course taught.

OR

30 units of College Credit or a Teaching Credential
plus 4 years or of "professional experience" related to the subject matter of the course taught.

3) Rationale:

The training of students in the Automotive Technology Program is primarily based upon professional experience, master of skills, and expert status in a specific field. This this expertise can be shown and enhanced by trade certifications or manufacturer training, beyond just years of experience.

Submitted by: Glen Hammonds

Department: Automotive / Diesel / Welding

REQUIRED SIGNATURES

SAC Department Chair or designee: Glen Hammonds

A signature indicates support for the equivalency and agreement that the proposed qualifications are equivalent to the minimum qualifications of the discipline.

Signature: [Signature] Date: 8-22-13

SCC Department Chair or designee: N/A

A signature indicates support for the equivalency and agreement that the proposed qualifications are equivalent to the minimum qualifications of the discipline.

Signature: N/A Date: _____

Three faculty from the Department, FSA, Discipline or Division:

A signature indicates support for the equivalency and agreement that the proposed qualifications are equivalent to the minimum qualifications of the discipline.

1) Faculty's Name: Glen Hammonds

Signature: [Signature] Date: 8-22-13

2) Faculty's Name: Doug Wilkes

Signature: [Signature] Date: 8-22-13

3) Faculty's Name: Max Serrano

Signature: [Signature] Date: 8/22/13

Academic Senate/Representative: Doug Wilkes

A signature indicates support for the equivalency and agreement that the proposed qualifications are equivalent to the minimum qualifications of the discipline.

Signature: [Signature] Date: 8-22-13

Academic Dean/Supervisor: Bart Hoffman

Signature indicates receipt of equivalency request.

Signature: [Signature] Date: 8/22/13

SAC Academic Senate President: John Zarske

Signature: [Signature] Approved ☒ Denied ☐ Date: 8/23/13

SCC Academic Senate President: N/A

Signature: N/A Approved ☐ Denied ☐ Date: _____

Reason for Denial:

College President or Designee: Erlinda J. Martinez

Signature: [Signature] Date: 8-29-13

If not approved at any level, the form will be returned to the appropriate Department Equivalency Committee.