

Equivalency Certification for Noncredit Older Adults

Name: _____ Department: Community Education

Semester/Year: _____ Discipline/Area: _____

Criteria for Equivalency: The applicant named above meets the criteria for equivalency. This has been verified by review of the applicant's official college transcripts and other materials. (Attach documents used to verify candidate's qualifications.)

Minimum Qualifications:

A bachelor's degree with a major related to the subject of the course taught, **and** either thirty hours or two semester units of course work or class work in understanding the needs of the older adult, taken at an accredited institution of higher education or approved by the district. This requirement may be completed concurrently during the first year of employment as a noncredit instructor, **OR** one year of professional experience working with older adults.

Criteria for Equivalency

- A bachelor's degree in any discipline and two years of professional experience related to the subject of the course taught.
- An associate degree in any discipline and either A or B:
 - (a) four years of related professional experience, or
 - (b) 90 hours or six semester units of coursework in understanding the needs of older adults.
- Six years continuous related experience related to the subject of the course taught and evidence of attaining course work or experience equal to the general education requirements as outlined in Title 5 section 55063.
- Recognized accomplishments which demonstrate expertise and skills in the field of study clearly beyond those that are normal and evidence of attaining course work or experience equal to the general education requirements as outlined in Title 5 section 55063.

Rationale: Explain how the applicant's qualifications meet the selected guideline. Qualifications must be verified with appropriate documentation.

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| Signature of Candidate | Date |
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| I have reviewed all documentation and recommend approval of regular equivalency certification. | | | |
| Signature of Department Chair | Date | Signature of Dean | Date |
| Signature of Appropriate Academic Vice President | Date | Signature of Committee Chair Professional Standards Committee | Date |