|  |
| --- |
| **I. FACULTY INFORMATION** |
| Name | Name | Title | Faculty Title | PSID | PSID |  |
| Department | Department | College | Select an item |
|  |  |  |  |
|  |  |  |

**U.S. Department of Education Certification**

**To comply with U.S. Department of Education guidelines, this offer is void if you affirm to the following question:**

Have you ever been convicted of or pled *nolo contendere*or guilty to, a crime involving the acquisition, use, or expenditure of Federal, State, or local government funds; or have you ever been administratively or judicially determined to have committed fraud or any other material violation of law involving Federal, State, or local government funds?

##  [ ] No [ ] Yes \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

##  Faculty Member Date

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| **II. SELF-DECLARATION OF PROFICIENCY IN ENGLISH AS SPOKEN LANGUAGE** |
| The University of Houston requires that all persons who are employed as faculty/teaching personnel self-declare that they are proficient in spoken English prior to the beginning of their instructional assignments. Please complete the appropriate section based on your proficiency. |  |
| [ ] **Yes** | I am proficient in English as spoken language.  |  |
|  |  |  |  |  |
|   |  **Faculty Member**  |  | **Date** |  |
|  |  |  |
| [ ] **No**  | I am not proficient in English as a spoken language. Please complete the following information and sign below. |
|  | Country of National Origin  |   |  |
|  | Academic Training in English  |   |  |
|  | Test Scores (Specify Name of Test)  |   |  |
|  |  | Score  |   |  |
|  | Other relevant information  |   |  |
|  |  |
|  | **I understand that I am required to participate in the University of Houston language assessment program if I am not proficient in English as a spoken language and have not met the minimum test scores as set in the UH Faculty Handbook.** |
|  |  |  |  |  |
|   |  Faculty Member  |  | Date |  |
|  |  |  |

### III. DEPARTMENT CHAIR’S CERTIFICATION OF ENGLISH LANGUAGE PROFICIENCY

I hereby certify that the faculty member named above is proficient in spoken English. [ ] **Yes** [ ] **No**

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 Department Chair Date Dean Date