



COLLEGE IN HIGH SCHOOL PROGRAM INSTRUCTOR INFORMATION FORM

Date: ☐ New ☐ Returning

Personal Information (needed to add as Adjunct Instructor)

Instructor Name:
(Last, First, Middle Initial)

Have you previously
attended or taught
at SUNY Potsdam?

☐ No

☐ Yes

Date of Birth:

If yes, previous name?

Personal Address & Contact Information

Address:

City, State, Zip:

Home Phone:

Cell Phone:

Email:

Program & Class Information

School Name:

Class Name:

Number of Years Teaching this Class:

Is this course taught via Distance Learning?

When is class offered during year? ☐ Full year ☐ Fall Only ☐ Spring Only

Class Days & Times:

Items Needed to Review Course Proposal:

☐ Instructor Information Form

☐ Instructor Resume/CV

☐ Class Syllabus/Course Outline

High School Instructors:

Thank you for your interest in
SUNY Potsdam's College in
High School program.

Please complete the following
information in order for the College
in High School program to add you to
our system as the instructor of record.

Submit Documentation:

Please submit all course
proposal materials to your
school's College in High School
primary contact (typically
Guidance Counselor) who will
forward materials together.

By FAX: 315.267.2157

By MAIL: College in High School c/o

Registrar's office

SUNY Potsdam

44 Pierrepont Ave

Potsdam, NY 13676

Someone from the College in High
School office will be contacting you
once this form is received for your
Social Security number. This
information is needed to create an
active SUNY Potsdam Campus
Computer Account.

Proposals are accepted year-round