UNIVERSITY OF HAWAIʻI (KAPIʻOLANI COMMUNITY COLLEGE)

LECTURER POOL LIST

(Due in HR Office by July 15 and December 1 each year)

Campus: _____ Division: _____Department: _____

Job Title: _____

No.	Applicant's Name (Last, First, M.I.)	Entry Year	Expiry Year

Department Chair/Coordinator: _____

(Signature) (Printed Name) (Date)

Vice Chancellor/Dean/Director: _____

(Signature) (Printed Name) (Date)

Form 17 should be submitted before submitting this form.