



CHARLES R. DREW UNIVERSITY OF MEDICINE AND SCIENCE
 Office of Registration and Records
 1731 East 120th Street, Los Angeles, Ca. 90059 (323)563-4838

New Instructor Information Form

Instructions: This form must be completed for each new instructor who will be assigned to teach a class. The form only needs to be filed one-time. Once the instructor has been entered into PowerCampus, he/she can be assigned to classes. Please return this form to the Office of Registration and Records.

PLEASE PRINT CLEARLY

Title: **Dr.** **Mr.** **Ms.**

Last Name:	First Name	M.I.	DOB
Enter ID Number from back of Employee ID card. If new hire does not yet have Employee ID Number, he/she cannot be assigned to classes as an instructor.		Employee ID Number:	
Position:		Department:	

Instructor Class Assignments for Term : _____ **Year:** _____

Dept and Course Number	Section	Course Title

Program Director Signature: _____ Date: _____

Registrar Office Use Only

Date Entered:	PowerCampus ID:
Date Instructor Notified about MyCDU:	By: