

FOR CLINICIANS CURIOUS ABOUT TEACHING

OT Academia *Starter Guide*

How clinicians move into teaching without a 10-year plan.

By The Kozey OT

For the OT or OTA who keeps thinking, *I think I might want to teach, but I honestly have no idea where to start.*

BEFORE WE START

A quick note

I get some version of this message pretty often: *I want to teach, but I have no idea where to start.*

I understand that feeling because that was me. I did not have a big plan for going into academia, and I definitely was not sitting around thinking I had everything figured out as a clinician.

In my head, teaching was something I might do much later. Like, maybe 10 years into practice, after I had a lot more experience. What happened instead is that people who knew me, including a former professor and some of my peers, started telling me they thought I was ready and qualified for it before I really believed that about myself.

I remember thinking, are you sure? Because from where I was sitting, there still felt like so much I did not know.

I am not sharing that because my path is the way everyone should do it. Every program is different, every clinician is different, and I am still learning plenty in this job. I am sharing it because the questions I had at the beginning are the same questions I hear from other people now. Where are these jobs even posted? What do all of these faculty titles mean? Do I need a doctorate? Am I qualified for any of this, or am I getting ahead of myself?

If those are your questions too, this guide is for you. I tried to write it the way I would explain it if we were just talking it through, with the practical details included, because those details are usually the part that is hardest to find.

SECTION 1

Where to look for jobs

This part surprised me when I first started looking. Academia jobs are usually not posted in the same places as clinical jobs, so if you have only been looking where you would look for a clinic position, it can look like there are not many teaching jobs out there.

Here is where I would start:

- **HigherEdJobs ([higheredjobs.com](https://www.higheredjobs.com)):** Search for "occupational therapy" and "occupational therapy assistant." You can narrow it down from there by faculty roles and health-related categories (HigherEdJobs, n.d.-b). I shared this site in my stories in October 2026 and 243 people clicked it, which told me a lot of you had just never been shown where to look.

- **AOTA Career Center (aota.org/career/career-center):** The Career Center is AOTA's career page, and it sends you to [OTJobLink](https://aota.otjoblink.org) (aota.otjoblink.org) for the job listings themselves (American Occupational Therapy Association, n.d.; OTJobLink, n.d.). It is smaller than HigherEdJobs, but it is specific to OT, so it is worth checking.
- **University HR pages:** Some programs post a job on their own university site first, and some post it only there. If there are a couple of OT or OTA programs near you that you are interested in, bookmark their HR pages and check them directly.
- **State OT association postings and newsletters:** I see adjunct and OTA program roles show up here, and they can be easy to miss if you are only checking the big boards.
- **Program websites:** If you look at a program's faculty pages over time, you start to get a sense of how big the program is, whether it seems to be growing, and whether they use adjunct faculty often.

You do not need to do this every day or make it a whole project. A routine that has worked for a lot of people is something like this, once a week, in about 20 minutes:

01 Set up a job alert

Set up a HigherEdJobs email alert for occupational therapy faculty roles, so some of this comes to you instead of you having to remember to search (HigherEdJobs, n.d.-a).

02 Check OTJobLink

You can get to it from the AOTA Career Center.

03 Check your bookmarked programs

Check the HR pages for the two or three local programs you bookmarked.

04 Save postings that sound interesting

Save them even if you are nowhere near applying yet. Reading real postings helps a lot. You start to see what programs ask for, what words they use, and what comes up over and over.

A small checklist to get started

- ☐ Job alerts set up
 - ☐ Local programs bookmarked
 - ☐ First 3 postings saved, just to read and learn from
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What these faculty jobs are

When I first started looking at postings, I assumed "professor" was basically one job with one set of expectations. It is not, and that confused me at first.

In my current role, my work falls into buckets that a lot of faculty talk about: teaching, service, and research or scholarship. Teaching is probably what you picture. Service is things like faculty senate, being involved in our state OT association, chairing committees, and community service. And one part of my job that I really enjoy, and did not fully expect, is the fieldwork side of it. Being involved in fieldwork as an Academic Fieldwork Coordinator keeps me connected to what is happening in clinics, and I like that connection a lot.

The mix of those buckets looks different depending on the type of role:

Tenure track: Teaching, plus a larger expectation around research and scholarship over time, and a long review process that can lead to tenure. These roles can be 9 month or 12 month contracts, depending on the school.

Professor of practice or clinical track: This is closer to my world. Teaching tends to be a bigger part of the day-to-day work, along with service and staying connected to clinical practice. What a school expects for research or scholarship in these roles varies a lot, so you really have to read the individual posting and ask questions.

Adjunct: You teach a specific course, sometimes online, sometimes in person, without being in a full-time faculty position. Adjunct teaching can be one entry point for clinicians. It lets you find out whether you like teaching, grading, planning lessons, all of that, before you make a bigger change. Programs use adjuncts regularly.

Academic Fieldwork Coordinator, or AFWC: In this role you place students for fieldwork, build and maintain relationships with clinical sites, and support both students and fieldwork educators. If you like the clinical world and do not want to lose touch with it completely, this is worth understanding.

Capstone Coordinator (OTD programs): The doctoral capstone coordinator role is associated with entry-level OTD programs. The coordinator oversees the program's doctoral capstone requirements, supports students as they develop and complete their projects, and works with faculty mentors and community or clinical partners. ACOTE specifies the coordinator's qualifications, including a doctoral degree and 3 years of documented experience that includes clinical practice, postsecondary teaching, and scholarship (Accreditation Council for Occupational Therapy Education [ACOTE], 2026). Some programs assign this responsibility to an existing faculty member rather than hiring a separate coordinator. The person serving in the role must still meet ACOTE's requirements.

Program director or chair: This is the leadership side: accreditation, curriculum, budgets, hiring, that kind of thing. It is usually not where someone starts in academia, but it helps to know what these roles are because directors and chairs are often involved in hiring.

A FEW OTHER TERMS YOU WILL SEE A LOT

9 month vs 12 month contract: Basically, whether your contract covers the academic year or the full year. How pay is spread out, and what your summers look like, can be very different from one school to another, so ask directly rather than assuming.

Teaching load: How many courses, or how many credits, you are expected to teach in a term. This affects your daily life more than almost anything else in the posting, so I would ask about it early.

Service: Committee work, faculty senate, professional association involvement, community work. It is a normal part of a faculty job, not something extra you do if you have spare time.

Scholarship: This can mean presenting, publishing, or other professional work where you are contributing to the field. What counts, and how much is expected, depends on the role and the school.

My honest advice here is to read past the title. Two jobs can both say assistant professor and feel completely different once you look at the teaching load, the contract length, and what they expect outside of teaching.

SECTION 3

What programs are looking for

This is the section where I see people get discouraged and stop looking, usually before they have given themselves a fair chance.

I will try to explain it simply, with the understanding that this is general information. It is not a promise about any specific program, and schools do not all do this the same way.

About degrees. It helps to know that two different things are in play here. ACOTE, the accrediting body for OT and OTA programs, sets degree requirements that accredited programs have to meet for their full-time faculty. Each institution then writes its own job postings, with its own required and preferred qualifications on top of that. A posting can ask for more than the ACOTE minimums, but an institution cannot waive an ACOTE requirement for a full-time faculty role (ACOTE, 2026).

- For entry-level doctoral OT programs, under the current (2023) ACOTE Standards, all full-time faculty who are occupational therapy practitioners and teaching in the program must hold a doctoral degree (ACOTE, 2026). That doctorate does not have to be an OTD. It can be a PhD, EdD, or another doctoral degree. A master's degree and clinical experience do not substitute for a doctorate in a full-time faculty role in a doctoral program.
- For entry-level master's OT programs, the majority of full-time faculty who are occupational therapy practitioners must hold a doctoral degree, and all full-time faculty must hold at least a master's degree (ACOTE, 2026).
- For OTA programs, the ACOTE minimums are lower. In a baccalaureate-level OTA program, the majority of full-time faculty who are occupational therapy practitioners must hold at least a master's degree, and all full-time faculty must hold at least a baccalaureate degree. In an associate-level OTA program, all full-time faculty who are occupational therapy practitioners must hold at least a baccalaureate degree (ACOTE, 2026). Individual postings may still ask for more than these minimums.
- The requirements above are the ones ACOTE writes for full-time faculty. Adjunct and part-time roles work differently: programs count adjunct and part-time faculty as part of their overall faculty (ACOTE, 2026), and the qualifications for a particular adjunct role are set by the institution and the posting. So a master's degree and clinical experience may be enough for some adjunct roles, but that is the institution's call in the posting, not something to assume. Titles like "clinical track" and "professor of practice" come from institutions, not from ACOTE. What matters for the ACOTE degree requirement is the faculty category the standard covers: a full-time faculty member in an entry-level doctoral OT program who is an occupational therapy practitioner teaching in the program must meet the doctoral degree requirement above, regardless of whether the institution calls the position clinical track, professor of practice, or something else.

Experience you already have might count for more than you think:

- Your years in clinical practice, especially if you have a particular area you know well
- Taking fieldwork students, for Level I or Level II
- Guest lecturing, doing in-services, or training new staff where you work
- Presenting at a conference or giving a webinar, including at the state level
- Mentoring students or newer clinicians, precepting, or helping run a student program at your site

If you have done some of those things, you have not "only" been a clinician. You have been teaching in clinical settings, and it helps to start describing that experience for what it is.

How I would read a posting:

- When it says **required**, that is the program saying you need that to be considered.

- When it says **preferred**, that means it would be helpful, but it does not automatically rule you out if you do not have every single item. Postings often describe the ideal candidate. If you meet the required qualifications and some of the preferred ones, it is reasonable to apply and let the program decide.

I know that is easier to say than to do when you are looking at a long list and feeling underqualified. Try working through one real posting like this:

Checklist

- ☐ Highlight what is required vs what is preferred
- ☐ Write down where your clinical experience lines up with what they are asking for
- ☐ Note one gap you could realistically work on over the next 6 months

SECTION 4

Things you can do before you apply

You do not have to wait until you have a faculty job to start getting some teaching experience. A lot of people I talk to are already doing pieces of this in their clinical jobs, they just have not thought about it that way yet.

Try a guest lecture. If you know a faculty member, or you feel comfortable reaching out to a program, I would keep the ask specific. It is a lot easier for someone to say yes to a clear offer than to a general one. For example, instead of saying you would love to teach sometime, you could offer to teach one session on a topic from your own practice area, for a specific course, and share a few bullet points about what you would cover. Use a topic you know well from your work, not one you feel like you should pick.

Look into adjuncting one course. This can be a good way to try teaching out, for you and for the program. You find out pretty quickly how you feel about lesson planning, grading, answering student emails, office hours, all of it, and you can usually do it without leaving your clinical job first.

If you take students, keep track of it. Taking fieldwork students is teaching experience. Write down how many students you have had, what level they were, what you were teaching them, and how you gave feedback. People forget these details later when they are trying to update a CV, so keeping a simple list as you go helps.

Present somewhere, even if it is small. A state conference, a local association event, or a webinar through your job all count as experience explaining what you know to other people. It also gives you something concrete to put on an academic CV.

None of this has to happen all at once. If it helps to see it laid out, here is a loose 6 month version:

A LOOSE 6 MONTH VERSION

Month 1: Set up job alerts, save 5 postings to read, and start updating your resume

Month 2: Reach out about 1 guest lecture

Month 3: Take a student, or mentor someone in a more formal way, and write down what you did

Month 4: Submit an idea for a state conference or a webinar

Month 5: Teach something, in any setting, and pay attention to feedback you get

Month 6: Apply for an adjunct role, or for a full-time role where you meet the required qualifications

That timeline is not a rule. Some people will move faster, some slower, and real life will get in the way sometimes. It is just there to show that this can be broken into smaller steps instead of feeling like one huge leap.

SECTION 5

What you will need to apply

Applications for academia look a little different from clinical job applications, and that part took some getting used to for me too.

An academic CV is not quite the same as a clinical resume. A resume mostly lists your jobs. An academic CV also makes room for teaching, presentations, service, mentoring, and scholarship, even if a lot of that experience happened while you were in a clinical role.

Here is an example of what I mean. This is an example for illustration, not a line from my own CV:

ON A CLINICAL RESUME

- "Supervised OT students during fieldwork rotations."

ON AN ACADEMIC CV

- "Fieldwork educator for Level II OT students. Provided weekly supervision and feedback, completed midterm and final evaluations, and adjusted learning plans based on student progress."

It is the same experience. The second version just explains the teaching part more clearly, which is what a faculty search committee is trying to understand.

Cover letters, especially if you are changing settings. I would not overcomplicate this. A clear letter usually does a few things: it explains why you are interested in teaching and in that particular program, it helps the reader connect your clinical experience to teaching, and it gives an idea of what you could contribute early on. That could be a course you are prepared to teach, clinical connections, fieldwork relationships, or experience with a student population the program serves. Write it in your normal voice. Committees read a lot of these, and a letter that sounds like a real person tends to be easier to read.

Teaching philosophy statement. Some programs ask for a short statement, often about a page, about how you approach teaching. If the phrase itself feels intimidating, you are not alone. A simple way to organize it is to write about what you believe helps students learn, how you teach, how you try to include students who learn differently, and how you notice whether something is working and change it if it is not. I would avoid copying formal language from a textbook for this. What you have learned from working with students or newer clinicians in real settings is a reasonable place to start.

References. Try to choose people who have seen you teach, mentor, present, or work with students, when you can, not only your most recent manager. It helps to ask early, and to share the job posting with them so they know what kind of role you are applying for.

Checklist

- ☐ Resume updated into an academic CV format
- ☐ At least 1 experience rewritten so the teaching part is clear
- ☐ Cover letter outline started
- ☐ List of 3 possible references, and what each person has seen you do

SECTION 6

Interviews, teaching demonstrations, and offers

What this looked like for me. This will be different at every school, but for my current position, I applied and was first invited to a Zoom interview with the program director and the search committee. After that, I was invited to give a presentation and meet with the department head and the Dean of the college that houses the program.

That stage would typically happen in person, but I was living in Alaska at the time. The university graciously allowed me to complete the entire process via Zoom rather than fly 24 hours across the country. After my presentation, I also interviewed with a panel of students who asked me questions.

I share that because you may meet with more groups than you expect during a faculty search, including students, and the format can vary by institution and by your situation.

My favorite detail from the whole process? I was walking back to my car after visiting a thrift store in Alaska when the department called to offer me the position. Such a cool moment!

The teaching demonstration. For some faculty interviews, a program will ask you to teach a short sample lesson so they can see how you teach. If that happens, I would choose a topic you know really well, teach a small part of it, and leave a little room for students to participate or practice something. Trying to fit an entire chapter into a short demonstration usually makes it harder, not better. The format and length vary by program, so ask what they are expecting if they invite you to do one.

QUESTIONS YOU MIGHT HEAR IF YOU ARE COMING FROM CLINIC

Why academia, and why are you interested in making this change now?

What courses could you teach when you start, and what would you like to grow into?

How would you support a student who is struggling?

How do you keep your clinical knowledge current?

I do not think there is one perfect answer to questions like these. In my experience, honest and specific tends to be more helpful than trying to sound impressive. If you have an example from working with a student, a patient, or a newer clinician, use it, just leave out any identifying details.

Looking at an offer. Academia offers have some pieces that might be new if you have mostly worked in clinic. Before you accept, try to get clear on your rank and track, whether it is a 9 month or 12 month contract, your teaching load, what service is expected, the start date, whether there is support for conferences or scholarship, and how summers are handled.

On pay, don't assume academia always pays less than clinical practice. Compensation varies by role, institution, location, and contract length. Look at the salary range, benefits, workload, and contract terms before comparing offers.

If you are not sure how to ask questions about an offer or how to talk through terms, it is okay to slow down, ask for information in writing, and take time to think before you answer. That is true in clinic, and it is true in academia too.

Your first 90 days

You do not need to figure out your whole career in the next 90 days. This is just a way to start looking in a more organized way, if that would be helpful.

01 Weeks 1 to 2

Set up job alerts, bookmark a few local programs, and save 5 postings to read.

02 Weeks 3 to 4

Start turning your resume into an academic CV, and rewrite about 5 of your experiences so the teaching parts are clearer.

03 Month 2

Reach out about 1 guest lecture, and take a student or document a student experience you already have.

04 Month 3

Start a rough draft of a teaching philosophy statement, and apply for 1 adjunct or full-time role if you find one where you meet the required qualifications.

A CLOSING NOTE

Thanks for reading

If you look through postings for a few months and decide teaching is not for you, that is useful information too. And if you read through them and find yourself getting more interested, that tells you something as well.

For me, the biggest shift was realizing I did not have to have the next 10 years completely planned before I was allowed to look into this. I could just start by learning more, getting a little experience, and seeing where it went.

If teaching is something you keep coming back to, I hope this helps you take the first real step, even if it is a small one.

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THE KOZEY OT

More free resources for OT students, new grads, and OTPs at thekozeyot.com

References

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