

**ADMINISTRATIVE EVALUATION FORM
FOR CLASSROOM FACULTY**

Faculty Name	Employee Number	Campus
Department Name	Date of Evaluation	Date of Conference(s)

Attach additional sheet(s) if needed

1. KNOWLEDGE OF SUBJECT AREA:

This category addresses the instructor's subject matter knowledge as evidenced in his or her classroom presentations. It includes knowledge of current trends in the field and the ability to teach the course as presented in the college's official course outline.

Rating:

- Satisfactory
- Need to Improve
- Unsatisfactory
- No basis for judgment

Describe/summarize input from Peer Evaluation, appropriate individuals as designated by the faculty member and/or administrator, any other data collected, and how the input was collected.

Goals and time line for improvement:

2. EFFECTIVENESS:

This category includes retaining students, keeping student confidences, demonstrating respect for students in general, creating a learning environment that is conducive to learning, setting an atmosphere of trust and sensitivity, and motivating students to learn. It also includes contributing to faculty committees and interacting effectively with peers.

Rating:

- Satisfactory
- Need to Improve
- Unsatisfactory
- No basis for judgment

Describe/summarize input from Peer Evaluation, appropriate individuals as designated by the faculty member and/or administrator, any other data collected, and how the input was collected.

Goals and time line for improvement:

ADMINISTRATIVE EVALUATION FORM FOR CLASSROOM FACULTY (continued)

3. PERFORMANCE OF RESPONSIBILITIES:

This category includes issues such as providing students with a written syllabus that includes grading standards and course expectations, evaluating students according to the stated criteria. It also includes the instructor's ability to meet class for the full-designated time, submit required grades and rosters on time, and maintain office hours.

Rating:

- Satisfactory
- Need to Improve
- Unsatisfactory
- No basis for judgment

Describe/summarize input from Peer Evaluation, appropriate individuals as designated by the faculty member and/or administrator, any other data collected, and how the input was collected.

Goals and time line for improvement:

4. PARTICIPATION IN PROFESSIONAL GROWTH ACTIVITIES:

This category includes a demonstration of the instructor's willingness to continue to improve his or her professional effectiveness and participate in professional growth activities. Suggestions for Professional Development are included if relevant.

Rating:

- Satisfactory
- Need to Improve
- Unsatisfactory
- No basis for judgment

Describe/summarize input from Peer Evaluation, appropriate individuals as designated by the faculty member and/or administrator, any other data collected, and how the input was collected.

Goals and time line for improvement:

ADMINISTRATIVE EVALUATION FORM FOR CLASSROOM FACULTY (continued)

5. OVER-ALL EVALUATION: (use additional sheet if necessary)

Describe special abilities warranting exceptional recognition in detail. Describe specific examples that support a rating of *Unsatisfactory* or *Needs to Improve*.

Rating:

- Satisfactory
- Need to Improve
- Unsatisfactory

Summary:

I recommend this employee:

- be continued in service
- be continued in service contingent upon needed improvements as noted.
 - Date for follow-up Administrative Evaluation: _____
- not be continued in service

Dean signature: _____ Date: _____

Vice President or designee: _____ Date: _____

President Signature: _____ Date: _____

I have received a copy of this report but my signature does not necessarily indicate my agreement. I understand that any written statement I forward to the Division of Human Resources regarding this report will be attached to the copy, which is filed there.

Faculty signature: _____ Date: _____

Witness signature: _____ Date: _____