**ANNUAL FACULTY EVALUATION REPORT FOR INSTRUCTORS**

**Name**:

**Academic Department**:      **Evaluation Period**: **2024**

**TEACHING**

**Document teaching by including information from course evaluations (means, median, example comments), teaching innovations, modifications, or improvements; professional development related to teaching; and/or course or program design or redesign.**

**List each course taught, including any independent study, internship, or structured research course that had a CRN (even if no student evaluations were completed). All fields are required for each course, and you may use NA for course evaluation sections if no evaluations were completed.**

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| **Spring Courses** |
| **Course Number and Title** | **CRN** | **Enrollment** | **Course Evaluation****Median of Medians** | **Course Evaluation****Mean** | **Course Evaluation Response Rate** |
|       |       |       |       |       |      % |
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| **Spring Course Feedback** |
| **Provide sample student comments that indicate teaching strengths.** | **Provide sample student comments that indicate potential teaching growth areas.** |
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| **How was feedback used to make changes or improvements and what was the result?** |
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| **Summer or J-Term Courses** |
| **Course Number and Title** | **CRN** | **Enrollment** | **Course Evaluation****Median of Medians** | **Course Evaluation****Mean** | **Course Evaluation Response Rate** |
|       |       |       |       |       |      % |
|       |       |       |       |       |      % |

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| **Summer/J-Term Course Feedback** |
| **Provide sample student comments that indicate teaching strengths.** | **Provide sample student comments that indicate potential teaching growth areas.** |
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| **How was feedback used to make changes or improvements and what was the result?** |
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| **Fall Courses** |
| **Course Number and Title** | **CRN** | **Enrollment** | **Course Evaluation****Median of Medians** | **Course Evaluation****Mean** | **Course Evaluation Response Rate** |
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| **Fall Course Feedback** |
| **Provide sample student comments that indicate teaching strengths.** | **Provide sample student comments that indicate potential teaching growth areas.** |
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| **How was feedback used to make changes or improvements?** |
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**Document other activities below that contributed to your workload in teaching**. **Note**: **Faculty are not required to engage in all activities listed below. This section is used to document teaching workload.**

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|  | **Spring** | **Fall** | **Summer\*** |
| **Number of new course preparations (or courses with >50% course revision)** |       |       |       |
| **Number of overload credit hours taught per semester (overload is not expected)** |       |       |       |

**\*For 12-month faculty**

**Did you have any reassigned time last year (reduced teaching load)**? [ ] Yes [ ] No

**If yes, how many total credit hours were reassigned:**

**What was the time reassigned for?**

**Did you receive a peer evaluation/observation of your teaching last year**? [ ]  Yes [ ] No

**If yes, attach the evaluation(s) to this form.**
  **Note: It is recommended that instructors in their first three years have an annual peer evaluation.**

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| **List or describe additional teaching accomplishments based on departmental expectations. This could include participation in Center for Teaching & Learning activities, other professional development, course or curricular modifications or improvements, and teaching innovation or improvement.** |
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| **You may use this space to describe your accomplishments in teaching or to provide contextual information pertinent to your responses in this section (OPTIONAL).** |
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| **Academic Department Head Evaluation and Comments** |
| **Evaluation Unsatisfactory (1)** **[ ]** **Below Expectation (2)** **[ ]** **Successful (3)** **[ ]** **Above Expectation (4)** **[ ]** **Exceptional (5)** **[ ]**  | Score        |
| **Comments specific to Teaching:**      |

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| **VPAA Evaluation and Comments** |
| **Evaluation Unsatisfactory (1) [ ]** **Below Expectation (2) [ ]** **Successful (3) [ ]** **Above Expectation (4) [ ]** **Exceptional (5) [ ]**  | Score        |
| **Comments specific to Teaching:**      |

**The following sections are not required for instructors, but you may use these to document any additional successes in research, scholarly, and creative activities as well as service and advising.**

**RESEARCH, SCHOLARLY, AND CREATIVE ACTIVITIES**

Provide your accomplishments this year in research, scholarship, and creative activities. Please add or delete rows as needed.

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| **Scholarship Activity** |
| **Scholarship Activity** | **Scholarship Type** | **Does this work involve students?**  | **Progress**  |
|       | Choose an item. | Choose an item. | Choose an item. |
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| **List or describe additional research, scholarly, and creative accomplishments based on departmental expectations. This could include pedagogical research, participation in professional activities, maintaining accreditation, or sharing expertise outside the traditional classroom so long as the activity enhances teaching or otherwise contributes to growth in the discipline. Scholarship can also include continued education and professional development activities appropriate to professional assignments.**  |
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| **You may use this space to describe your accomplishments in research, scholarly, and creative activities or to provide contextual information pertinent to your responses in this section (OPTIONAL).** |
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| **Academic Department Head Evaluation and Comments** |
| **Comments specific to Research/Scholarship/Creative Activity:**      |

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| **VPAA Evaluation and Comments** |
| **Comments specific to Research/Scholarship/Creative Activity:**      |

**SERVICE & ADVISING**

List and describe your service contributions, which may include those that contribute to the university, your department, your discipline, or the community. Advising service may be included as well. Please add or delete rows as needed.

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| **Service** |
| **Committee/Group/Activity/Event** | **Service Type** | **Role (e.g., member, chair)** | **Did you attend at least 80% of meetings, if applicable?** |
|       | Choose an item. | Choose an item. | Choose an item. |
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| **If you have formal advising responsibilities, provide information on the programs/students you advise and an estimate of the number of advisees/students you work with per semester (on average).**  |
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| **Provide information on any recruiting events or activities you engaged in last year.** |

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| **List or describe additional ways you engaged in service and advising, if applicable.** |
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| **Academic Department Head Evaluation and Comments** |
| **Comments specific to Service and Advising:**      |

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| **VPAA Evaluation and Comments** |
| **Comments specific to Service and Advising:**      |

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| **OVERALL RATING BY ADH** |
|  **OVERALL RATING** |       |
| **Academic Department Head Comments**      |
| **VPAA Comments**      |

**OVERALL RATING KEY**

**Exceptional:** The Faculty member’s performance is superior, far above what is required. Faculty member consistently exceeds highest standards.

**Above Expectation:** The Faculty member’s performance is consistently above normal expectations and standards.

**Successful:** The Faculty member’s performance is consistent with what is expected and considered acceptable.

**Below Expectation:** The Faculty member’s performance is generally below the minimum requirements for the job.

**Unsatisfactory:** The Faculty member’s performance does not meet minimum job requirements. Lack of improvement may result in disciplinary action.

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| **Based on the outcome of this annual evaluation, what goals are set for this year? This section should be completed by the Academic Department Head in discussion with the faculty member.** |
| **Teaching goals:****Other goals based on departmental expectations:** |
| **Employee Comments** |
| **Comments**      |

**Employee’s Signature**: Type your name here

I Agree [ ]  Disagree [ ]  with my Performance Evaluation.

**Date**: Click or tap to enter a date.

**Academic Department Head’s Signature**: ADH will type name here

Date: Click or tap to enter a date.

**VPAA Signature**: VPAA will type name here

Date: Click or tap to enter a date.