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Part Time Faculty Evaluation Record Sheet

This form is intended as the default part-time faculty evaluation form. Part-time faculty may elect to participate in a longer developmental evaluation, except that Developmental Evaluations for Part-time faculty do not require management involvement. [[1]](#footnote-1)

Employee Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ L#: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Division: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
|  | Date |
| Part Time Faculty member notified of up-coming evaluation |            |
| Multiple Indices to include **Mandatory** and any agreed upon **Optional**:**MANDATORY (see Article 13.3.3):**  |
| * Manager Observation
 |       |
| * Self (evaluation, reflection, portfolio, etc.) Reflection may include teaching, contributions to the department, program, discipline, college and/or community, professional development, scholarship, professional relationships, long-term curricular planning, and cultural competence professional development.
 |       |
| **Sample Questions:** *You may wish to address for the reflection and future goals include:** How have you maintained a current understanding of your field, developed necessary skills, and organized necessary resources?
* How do you effectively use appropriate instructional methods, modify procedures in response to changing circumstances and student needs?
* How do you foster an inclusive, equitable learning environment?
* How well do you achieve your goals?
* How does your work contribute to the work of other faculty, staff, and the college?
* Do you use a suitable style, effective organization, and communicate with clarity and integrity in your work?
* How do you critically evaluate your teaching and/or professional faculty responsibilities, assess student learning and use your evaluation to improve the quality of your work?
* Do you develop professional relationships conducive to a positive learning and working environment?
 |
| **OPTIONAL** (may choose one or more from Peer, Other)**:** |
| * Peer (observation)
 |       |
| * Student evaluation or feedback (may be included at the discretion of the faculty member)

 |       |
| [ ]  Other (mutually agreed upon by manager and part time faculty):      |       |
| * Observation review
 |            |
| * Evaluation feedback provided to employee
 |            |

|  |  |  |  |
| --- | --- | --- | --- |
| Supervisor Signature: |       | Date: |       |

I acknowledge receipt of the information provided above:

|  |  |  |  |
| --- | --- | --- | --- |
| Employee Signature |       | Date: |       |
|  |  |  |  |

*For part-time faculty: This record sheet and evaluation summary are* *due in Human Resources on or before June 30.*

***Reminder: Please enter and keep up to date PEAREVW information on this faculty member.***

1. Article 13.4.2 [↑](#footnote-ref-1)