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**APPENDIX VB**

**EVALUATION OF FACULTY MEMBER’S DEPARTMENTAL RESPONSIBILITIES FORM**

|  |  |
| --- | --- |
| Date: | *Date* |
| Name of Faculty Member Evaluated: | | | *Faculty Name* |
| Academic School: | | *Enter text here* | |
| Department: | | *Enter text here* | |

**SCALE:**

(5) Outstanding; (4) Very Good; (3) Good; (2) Satisfactory; (1) Satisfactory with reservations;

(0) Unsatisfactory; (N/A) Unable to observe.

|  |
| --- |
| **I. TEACHING EFFECTIVENESS** |

|  |  |
| --- | --- |
| Consensus of Teaching Evaluation | Scale |

|  |
| --- |
| Supporting Comments: |
| *Enter text here* |

|  |  |  |
| --- | --- | --- |
| **II. ATTENDANCE** | **Quality of Participation** | |
| Classes | | Scale |
| Department Meetings | | Scale |
| Faculty Meetings | | Scale |
| Department Committee Meetings | | Scale |

|  |
| --- |
| Supporting Comments (*must be included*): |
| *Enter text here* |

|  |  |  |
| --- | --- | --- |
| **III. DEPARTMENT** | **Quality of Participation** | |
| Cooperation with projects | | Scale |
| Rapport with faculty and students | | Scale |
| Submission of outlines | | Scale |
| Availability for advisement | | Scale |
| Seemed to know when students didn’t grasp material | | Scale |
| -Contacts advisees | | Scale |
| -Available for programming | | Scale |

|  |
| --- |
| Supporting Comments: |
| *Enter text here* |

|  |  |
| --- | --- |
| **IV. OPTIONAL** | |
| Student Activities Participation | Scale |
| Committee Participation | Scale |
| -College | Scale |
| -Department | Scale |

|  |
| --- |
| Supporting Comments: |
| *Enter text here* |

|  |
| --- |
| Other Pertinent Comments: |
| *Enter text here* |

|  |  |  |  |
| --- | --- | --- | --- |
| Signature of Evaluator: | *Signature* | Date: | *Date* |

|  |  |  |  |
| --- | --- | --- | --- |
| Signature of Faculty Member: | *Signature* | Date: | *Date* |