

## A&S: Tenured and Tenure-Track Faculty Evaluation Form

**PLEASE TYPE**

Department: \_\_\_\_\_ Date of review: \_\_\_\_\_

Faculty Member: \_\_\_\_\_ Effective hiring date: \_\_\_\_\_

Academic rank: \_\_\_\_\_ Since: \_\_\_\_\_ Highest degree: \_\_\_\_\_

Purpose of review: \_\_\_\_\_ Pre-tenure, \_\_\_\_\_ Tenure, \_\_\_\_\_ Promotion, \_\_\_\_\_ Triennial, \_\_\_\_\_ Annual

Period covered by the review: \_\_\_\_\_

If applicable, years of tenure credit granted for experience prior to present position at UND: \_\_\_\_\_

If applicable, years of tenure credit for service at UND including the current academic year: \_\_\_\_\_

**1. Expectations** (from page 2 of the contract):

\_\_\_\_\_ %Teaching, \_\_\_\_\_ %Research, \_\_\_\_\_ %Service, \_\_\_\_\_ %Administration, \_\_\_\_\_ %Other

**2. Evaluation:** Use the following five categories to describe the faculty member's performance relative to the expectations on page 2 of his or her contract (i.e., Position Description Form). A thorough narrative commentary must be included to justify each selection. **Mere selection of a category does not constitute evaluation and is unacceptable.**

**Significantly Exceeds Expectations:** Faculty member merits special recognition for unequivocally superior performance (e.g., worthy of national, international or professional award nominations or is clearly outstanding in their field). **Strong** supporting evidence must be presented in the narrative.

**Exceeds Expectations:** Designation used to indicate that certain aspects of the faculty member's performance exceed the norm. Supporting evidence must be presented in the narrative.

**Meets Expectations:** Designation used to describe the majority of cases that are considered.

**Falls Short of Expectations:** Designation used to indicate that certain aspects of the faculty member's performance could be improved. The narrative must address **specific areas** that need improvement.

**Falls Significantly Short of Expectations:** Designation used in rare cases where individuals are mismatched with their jobs, are not meeting professional obligations, or are simply incompetent. **Strong** supporting evidence must be presented in the narrative.

<b>Teaching:</b>					
	Significantly Exceeds Expectations		Exceeds Expectations		Meets Expectations
					Falls Short of Expectations
					Significantly Falls Short of Expectations
<b>Comments (required – expandable box):</b>					

<b>Research:</b>					
	Significantly Exceeds Expectations		Exceeds Expectations		Meets Expectations
					Falls Short of Expectations
					Significantly Falls Short of Expectations
<b>Comments (required – expandable box):</b>					

<b>Service:</b>					
	Significantly Exceeds Expectations		Exceeds Expectations		Meets Expectations
					Falls Short of Expectations
					Significantly Falls Short of Expectations
<b>Comments (required – expandable box):</b>					

<b>Administration:</b>					
	Significantly Exceeds Expectations		Exceeds Expectations		Meets Expectations
					Falls Short of Expectations
					Significantly Falls Short of Expectations
<b>Comments (required – expandable box):</b>					

<b>Other:</b>					
	Significantly Exceeds Expectations		Exceeds Expectations		Meets Expectations
					Falls Short of Expectations
					Significantly Falls Short of Expectations
<b>Comments (required – expandable box):</b>					

Department Evaluation Committee:

Committee Chair: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**3. Department Chair's Evaluative Narrative (Required for all tenured and tenure-track faculty). (Fill in expandable box or attach separate page):**

Was this evaluation made in accordance with a set of written departmental evaluation procedures on file in the College office and communicated to the faculty member?  Yes  No

Department Chair \_\_\_\_\_  
Signature Date

**4. Faculty Member**

I have been given the opportunity to review the contents of my file.  Yes  No  
I have seen this evaluation and discussed it with the appropriate departmental representative.  Yes  No

**Check one as appropriate.**

- I agree with the evaluation.
- I disagree with all or part of the evaluation.
- I disagree with all or part of the evaluation and intend to give my department chair a written statement within 5 working days.

11/21/08 revised

Faculty Member \_\_\_\_\_  
Signature Date

Dean \_\_\_\_\_  
Signature Date