



CONFIDENTIAL COLLEAGUE EVALUATION FORM

TENURE

_____ has applied for tenure. Please evaluate your colleague's **application**. The items **below** reflect the evaluative criteria enumerated in the Faculty Handbook. Rate the individual on each item, giving the highest scores for excellent performance and the lowest score for very poor performance. If you have no basis for response, check "Don't know." **Please use the comment section to clarify why you selected the rating that you chose.**

In each of the following areas how well does the candidate

Teaching

1) Demonstrate effective teaching and/or librarianship ability?

Excellently ☐ ☐ ☐ ☐ ☐ Poorly ☐ Don't Know

5 4 3 2 1

2) Provide service to students extending beyond the teaching function to student advisement and direction?

Excellently ☐ ☐ ☐ ☐ ☐ Poorly ☐ Don't Know

5 4 3 2 1

3) Contribute to the department by developing new courses and teaching a diversity of courses as needed?

Excellently ☐ ☐ ☐ ☐ ☐ Poorly ☐ Don't Know

5 4 3 2 1

Comments:

Confidential Evaluation of _____

Service

1) Evidence an expertise needed by his/her department or a related department and recognized as having value for achievement of the present and future goals of the department?

Excellently ☐ ☐ ☐ ☐ ☐ Poorly ☐ Don't Know
5 4 3 2 1

2) Participate effectively in the academics, cultural, administrative, and student affairs of the University?

Excellently ☐ ☐ ☐ ☐ ☐ Poorly ☐ Don't Know
5 4 3 2 1

3) Participate in civic affairs and public service?

Excellently ☐ ☐ ☐ ☐ ☐ Poorly ☐ Don't Know
5 4 3 2 1

Comments: _____

Scholarship

1) Maintain membership and involvement in the activities of professional societies?

Excellently ☐ ☐ ☐ ☐ ☐ Poorly ☐ Don't Know
5 4 3 2 1

2) Demonstrate involvement in research, publication, and/or creative achievement as defined by the applicant's department standards for scholarship?

Excellently ☐ ☐ ☐ ☐ ☐ Poorly ☐ Don't Know
5 4 3 2 1

Confidential Evaluation of _____

Comments:

Do you recommend this faculty member for tenure? (Check one)

☐ No support ☐ Support ☐ High support

Date _____

Signature of Evaluator _____