



State University of New York  
College of Agriculture and Technology  
Cobleskill, New York

## ACADEMIC FACULTY EVALUATION FORM

*TO BE COMPLETED BY EVALUATOR*

Name \_\_\_\_\_ Date \_\_\_\_\_

Current Rank \_\_\_\_\_ Department \_\_\_\_\_

Evaluation Form for period \_\_\_\_\_ through \_\_\_\_\_

### PURPOSE & INSTRUCTIONS

The primary purpose of the evaluation system is self-improvement. Evaluation is also an integral part of the decision involving reappointment, continuing appointment and/or promotion.

**This evaluation is to be completed by the Dean or his/her designee.** At least **three (3)** classroom/ reference observations need to be included to verify the evaluation process.

Evaluation to be used for (Check all that apply):

- 1. Effectiveness and self-improvement
- 2. Promotion to \_\_\_\_\_
- 3. Reappointment to a \_\_\_\_\_ year term
- 4. Continuing appointment

Criteria listed are meant to be illustrative not definitive (refer to Faculty Handbook for Criteria for Reappointment, Continuing Appointment, and Promotion). Use those criteria that apply and add lines for any other criteria to be considered. APPC recommends a minimum of ten (10) criteria spread across the three (3) categories, with no less than four (4) in the Teaching/Librarianship category and two (2) in each of the others. Give each selected criterion a rating of HE, E, or ME.

Because many people review this document, please write specific comments in the summary section that will help the reviewers make an informed recommendation. Use additional pages as necessary.

### DEFINITIONS FOR RATINGS (Only the following ratings should be used):

- HE** *Highly Effective* – Often exceeds the performance expectations.
- E** *Effective* – Generally meets performance expectations. Employee may exceed expectations or needs improvement in some areas. Performance is at the expected and usual level.
- ME** *Minimally Effective* – Does not always meet expectations. Immediate and substantive improvement in performance is required.

***Performance Category #1a – Effectiveness in Teaching***

For ease of completion, Category #1 is split between Teaching and Librarianship. Please use the section that applies to the individual being evaluated.

**Rating**

- \_\_\_ 1. Instructional proficiency in speech, organization of material, style of presentation, stimulation of critical thinking
- \_\_\_ 2. In-depth knowledge of content area
- \_\_\_ 3. Current/proven pedagogical practices
- \_\_\_ 4. Interacting with students outside of classroom setting
- \_\_\_ 5. Engaging advisees regularly

**Rating**

- \_\_\_ 6. Developing appropriate course content, curriculum, and/or teaching materials
- \_\_\_ 7. Creating/implementing appropriate instruments for student assessment
- \_\_\_ 8. Adapts/enhances course content based on feedback
- \_\_\_ 9. \_\_\_\_\_
- \_\_\_ 10. \_\_\_\_\_

**Summary Statement - Include Strengths and Areas for Improvement:**

This faculty member was observed in his/her classroom on the following dates:

Date \_\_\_\_\_ by \_\_\_\_\_

Date \_\_\_\_\_ by \_\_\_\_\_

Date \_\_\_\_\_ by \_\_\_\_\_

Date \_\_\_\_\_ by \_\_\_\_\_

The attached Observation Forms were reviewed with the faculty member.

**Performance Category #1b – Effectiveness in Librarianship**

For ease of completion, Category #1 is split between Teaching and Librarianship. Please use the section that applies to the individual being evaluated.

<b>Rating</b>		<b>Rating</b>	
___	1. In-depth knowledge of specialization	___	7. Creates and maintains instruments for assessing effectiveness
___	2. Uses feedback to improve operations and/or performance	___	8. Promoting services
___	3. Managing area/s of responsibility (supervising/evaluating staff, policies, procedures, etc.)	___	9. Developing liaison relationships
___	4. Understanding of overall operations, commitment to goals/services	___	10. Developing programs
___	5. New initiatives	___	11. _____
___	6. Integrating information literacy into the curriculum	___	12. _____

**Summary Statement - Include Strengths and Areas for Improvement:**

This faculty member was observed in his/her classroom or on Reference duty on the following dates:

Date \_\_\_\_\_ by \_\_\_\_\_

Date \_\_\_\_\_ by \_\_\_\_\_

Date \_\_\_\_\_ by \_\_\_\_\_

Date \_\_\_\_\_ by \_\_\_\_\_

The attached Observation Forms were reviewed with the faculty member.

***Performance Category #2 – Scholarship***

**Rating**

- \_\_\_ 1. Pursues advancement of knowledge base and performance levels
- \_\_\_ 2. Develops marketable instructional materials or instruction material to enhance course presentation
- \_\_\_ 3. Creates peer-reviewed artistic works
- \_\_\_ 4. Invitations for professional presentations or performances

**Rating**

- \_\_\_ 5. Produces articles in refereed or editor-reviewed publications
- \_\_\_ 6. Engages in successful grantsmanship
- \_\_\_ 7. Creates published (or selected unpublished) research, books, etc.
- \_\_\_ 8. \_\_\_\_\_

**Summary Statement - Include Strengths and Areas for Improvement:**

***Performance Category #3 – Service***

<b>Rating</b>		<b>Rating</b>	
___	1. Participates and/or leads in campus governance	___	7. Participates in community affairs
___	2. Participates and/or leads in University governance	___	8. Testifies as an expert witness
___	3. Supports student organizations	___	9. Serves on editorial boards
___	4. Serves internal/external and public and/or private organizations	___	10. Presents keynote addresses
___	5. Develops and implements local workshops	___	11. _____
___	6. Serves in professional organizations	___	12. _____

**Summary Statement - Include Strengths and Areas for Improvement:**

*Evaluation Conference Summary*

Select and complete the appropriate section.

- A. This evaluation has been completed for purposes of self-improvement only.
- B. This evaluation has been completed for purposes of reappointment, continuing appointment and/or promotion.

**Comments:**

**Recommendation for Reappointment, Continuing Appointment and/or Promotion:**

(Refer to Advancement Evaluation Table in the Faculty Handbook)

Name \_\_\_\_\_

- Is  Is Not Recommended for promotion to the rank of \_\_\_\_\_
- Is  Is Not Recommended for reappointment to a \_\_\_\_\_ year term
- Is  Is Not Recommended for continuing appointment

Signature \_\_\_\_\_  
Evaluator – Dean’s Designee Date \_\_\_\_\_

I  Do  Do Not Concur with this recommendation.

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

\*\*\*\*\*

I have reviewed this report.

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

A statement is attached.  Yes  No