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| *This form is for informational purposes only. All evaluations will be entered in eFaculty.* | | | | | | | |
| A chair or director who served on the department committee for a case shall not submit an independent review. If you are in this situation, please proceed one of 3 ways: | | | | | | | |
| 1. Request that the Department's or other Administrator remove the "chair committee" from the case. (Most laborious method.) 2. Using manager privilege, remove the requirement to complete this form before moving the case to the college level. 3. Fill in required elements of the form only, but indicate no rating is being provided. (Least laborious method.) | | | | | | | |
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| **HOW TO USE THIS FORM** | | | | | | | |
| **Cumulative Evaluations** | | | | | | | |
| *This is the only form used in cumulative evaluations.* | | | | | | | |
| Ratings of "Satisfactory" or "Not Satisfactory" are required in all reviews. Formative comments are allowed for "Satisfactory" ratings. Explanation of the rating is **required** for "Not Satisfactory" ratings. The appropriate administrator's rating is final. | | | | | | | |
|  | | | | | | | |
|  | **Name of Faculty Being Reviewed\*** | | | | | |  |
|  | Click or tap here to enter text. | | | | | |  |
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|  | **Reviewer Name (Committee Chairs: Add Committee Members’ Names)\*** | | | | | |  |
|  | Click or tap here to enter text. | | | | | |  |
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|  | **Review Level** | | | | | |  |
|  | Select an option | | | | | |  |
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|  | **For appropriate administrators only: Faculty response to department level evaluations was received and reviewed.** | | | | | |  |
|  | Select an option | | | | | |  |
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|  | **Please rate the performance of this faculty member in assigned duties during the period of review.\*** | | | | | |  |
|  | Select an option | | | | | |  |
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|  | **Comments** | | | | | |  |
|  | Comments are required if during cumulative evaluation, a faculty member's performance is rated "Not Satisfactory." Formative comments may be submitted for "Satisfactory" rating. | | | | | |  |
|  | Click or tap here to enter text. | | | | | |  |
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|  | **Required of appropriate administrators only (MPP, not Department Chairs): Date the PAF was Reviewed** | | | | | |  |
|  | The Personnel Action File (PAF) must be reviewed by the appropriate administrator (MPP) prior to submitting the cumulative evaluation rating (and explanation of any rating of "Not Satisfactory"). | | | | | |  |
|  | **Date** | | | | | |  |
|  | Click or tap to enter a date. | | | | | |  |
|  |  | | | | | |  |
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|  | **Submit Form** |  | **Save Responses** |  | **Return to Case** |  | |