



ANNUAL EVALUATION FORM

NON-TENURE TRACK FACULTY
(Adjunct only)

TO: Leonidas G. Bachas
Dean, College of Arts and Sciences

DATE:

FROM:

Chair/Program Director Name

Department/Program Name

SUBJECT: Evaluation for

Evaluation Period (*i.e. Fall, Spring, or Calendar Year*)

Evaluation of Teaching: Evaluate the faculty teaching effectiveness. Teaching effectiveness includes preparedness, effective presentation, accessibility to students, and fulfilling the educational goals and objectives of the course. Indicate whether the faculty member was formally evaluated by his/her students during this period and summarize the results. If evaluation is based on informal feedback, please describe (from advisors, student conversations, etc.). In addition, include summary of results of peer teaching evaluations, if occurring during this period.

Other Comments (as applicable/needed):

(space allows for about 300 words)

	Eligible for reappointment, subject to need and available funding, which is to be determined via the College's teaching replacement mechanism.
	Not eligible for reappointment.

By signing this form, I acknowledge receipt of this evaluation:

Faculty Signature

Date