



FACULTY 90-DAY PERFORMANCE EVALUATION

Faculty Name: _____

Review Date: _____

Associate Dean/Director: _____

Division: _____

INSTRUCTIONS:

The primary purpose of the assessment process at Collin College is to maintain quality educational programs. The process focuses on the professional growth and development of each faculty member as an individual in relation to the position description, standards of excellence, divisional and institutional goals and priorities. The performance appraisal process begins with the 90-day probationary evaluation completed using the criteria on this form and continues annually with the Faculty Performance Evaluation Form provided on the COE (Council on Excellence) site on the college intranet. The performance appraisal process is also used as a component in determining contractual status, including renewal, non-renewal, the awarding of multi-year contracts and termination.

The performance appraisal process is conducted in an atmosphere of open and honest communication and mutual trust between the faculty member and the Associate Dean/Director so that the performance appraisal process provides a growth experience for all college faculty members. Each faculty member is responsible for providing the Associate Dean/Director with objectives that support the mission and goals of the institution and identify professional development and accomplishments to be attained during the remainder of the first academic year.

Criteria used in the evaluation of the performance of faculty members during the probationary period are listed by category on the following pages. Using the definitions and examples for these ratings, select the rating from the drop down box to indicate the individual's performance for each criterion. Ratings are 'Meets' standard of excellence, 'Improvement needed', and 'Not applicable'.

DEFINITIONS AND EXAMPLES:

MEETS: One or more of the words usually, frequently, successfully, or effectively applies. This rating is appropriate for job performance that meets and may exceed required performance on any given criteria.

IMPROVEMENT NEEDED: One or more of the terms 'occasionally', 'marginally', 'inadequately', 'sometimes', or 'progressing' applies. This rating describes performance in which many of the job duties and standards are met, but where improvement in one or more areas is required to meet the criteria for excellence. An action plan must be in place, or be established to accompany this appraisal to clearly identify specific skills or areas in need of continued growth, development and/or improvement.

NOT APPLICABLE: The criterion is not part of the faculty member's job or position at the college.

PLEASE NOTE: In the comment area provided following each section, you must justify ratings that indicate a need for improvement and indicate what the faculty member needs to do to meet the criterion on next review.

I. TEACHING

1. Facilitates learning.
2. Provides students with the fundamental body of knowledge of his/her discipline.
3. Teaches students to apply that knowledge.
4. Responds to the differing educational requirements of students.
5. Employs current materials in classroom presentations and learning experiences.
6. Uses innovative teaching and learning methods.
7. Employs effective evaluation techniques.
8. Meets classes as scheduled.

COMMENTS:

II. COLLEGE SERVICE

1. Participates in required divisional and departmental meetings.
2. Has identified and selected opportunities for college service for the remainder of the year.

COMMENTS:

III. PROFESSIONAL DEVELOPMENT

- 1. Has identified professional development objectives and resources for the remainder of the year.

COMMENTS:

VI. ANNUAL GOALS/OBJECTIVES FOR THE REMAINDER OF THE YEAR

Together, the faculty member and the Associate Dean/Director should agree on a set of goals for the faculty member for the remainder of the academic year. **[Insert enumerated goals below]**

OVERALL EVALUATION: Indicate below the overall appraisal rating which best describes a summary of the above ratings and comments.

MEETS STANDARDS

IMPROVEMENT NEEDED

DOES NOT MEET STANDARDS

V. ASSOCIATE DEAN/DIRECTOR COMMENTS:

Associate Dean/Director Signature: _____ **Date:** _____

VII. FACULTY MEMBER'S COMMENTS:

Faculty Member's Signature: _____ **Date:** _____
