

Instructor: \_\_\_\_\_

Year: \_\_\_\_\_

**Annual Performance Review for Part Time Lecturer**

**Teaching**

<i>Course Number</i>	<i>Title</i>	<i>Semester</i>	<i>overall average for questions 8-16</i>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Instructor's range (overall average for questions 8-16) \_\_\_\_\_ (low) \_\_\_\_\_ (high)

Department's range (overall average for questions 8-16) \_\_\_\_\_ (low) \_\_\_\_\_ (high)

**Other responsibilities (e.g., workshops, committees, technology assistance)**

**Strengths (cite evidence, e.g., syllabus, student comments, classroom observations)**

**Weaknesses (cite evidence, e.g., syllabus, student comments, classroom observations)**

**Summary**

- not proficient
- proficient
- highly proficient
- exceptional

I have read this evaluation and I understand that I have five (5) working days in which to respond in writing.

\_\_\_\_\_  
Signature of faculty member                      \_\_\_\_\_  
date

- I will not be responding to this evaluation
- I will be responding to this evaluation.

Evaluator's name and position (printed)\_\_\_\_\_

\_\_\_\_\_  
Signature of evaluator                      \_\_\_\_\_  
date