

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

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

## Annual Self-Evaluation and Performance Report

### Teaching

<i>Course Number</i>	<i>Title</i>	<i>Semester</i>	<i>Overall average for questions 1-13</i>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Instructor's range (overall average for questions 1-13) \_\_\_\_\_ (low) \_\_\_\_\_ (high)

Department's range (overall average for questions 1-13) \_\_\_\_\_ (low) \_\_\_\_\_ (high)

Professional development engagement (e.g. workshops, Delphi U, PLAN Acad)

Other responsibilities (e.g., committees, organizations, administrative positions)

Strengths (based on self-reflection, syllabus, observations, student comments, etc.)

Weaknesses (based on self-reflection, syllabus, observations, student comments, etc.)

Goals

**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.

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Signature of instructor

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Date

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

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Signature of supervisor

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Date