University of Wisconsin-Superior
FACULTY PERFORMANCE EVALUATION
(Revised 11/2009)

Date:_____

Name:_____

Department:_____

Rank:_____

Highest Degree:_____

Years of Full-time Teaching or Administrative Experience:_____

Years on University of Wisconsin-Superior Faculty or Staff:_____

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DEPARTMENTAL RECOMMENDATION

_____	_____	_____
Unsatisfactory	**Satisfactory**	**Meritorious**

_____
Signature of Department Chair
Date:_____

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Approved _____

Not Approved_____

_____
Provost/Vice Chancellor and Dean of Faculties
Date:_____

NOTE: **Parts I through II (opposite side of page) should be completed on a separate sheet(s) by the faculty member being evaluated. Attach relevant information, including a summary of student evaluations.**

I. TEACHING:

A. Describe your teaching load including preparations, enrollment, labs, studios, etc.
B. Summarize independent studies, theses, or other student activities directed this year.
C. Describe improvement of instructional materials or new courses during the current academic year.
D. Leadership in curricular/teaching development.

II. SCHOLARSHIP:

A. Describe artistic performances or scholarly presentations.
B. Detail scholarly publications or presentations.
C. Describe ongoing programs of scholarly work.

III. SERVICE:

A. Describe service to the department and the university.
B. Describe service to professional organizations.
C. Describe professional service to the community.

NOTE: Department Chairs, please return this form with one set of supporting documents, including student evaluation information, to Mary Noyes, c/o Provost's Office by FEBRUARY 12, 2010.