FACULTY HANDBOOK

SECTION 14

CRITERIA

for

EVALUATING FACULTY AND ADMINISTRATIVE EFFECTIVENESS

The University of Texas
School of Health Professions
at Galveston

The University of Texas Medical Branch at Galveston
A system for collection of evaluative data concerning the performance of faculty and administrative activities has been approved by the faculty. The faculty effectiveness data are utilized for decision making by both the supervisor and Appointment, Promotion, and Tenure (AP&T) Committee. The administrative effectiveness data are utilized for reappointment decisions. The system of evaluation is tied to the yearly Annual Description of Faculty Activities made between the faculty/administrator and his/her supervisor. In the document, the percentage of effort designated to each category of faculty activity and the responsibilities within each category are specified. Faculty activities are classified into the following categories: teaching, scholarly activity, service, and administration. The evaluators include students, peers and supervisors. The pool from which the peer evaluators are selected is also defined in the Annual Description of Faculty Activities. All of the evaluative data and additional supportive material submitted by the faculty member are collected in an Evaluation Folder which is kept confidential by the supervisor. The Folder is used by the supervisor and the AP&T Committee for decision making. The system is described in detail in the document "The System for Evaluation of Faculty Effectiveness," dated March 26, 1981, and approved by the Faculty for implementation as of September 1, 1981. A set of evaluation forms were approved by the faculty on September 3, 1981. The standard operating procedures for administering student evaluations of instructor and peer evaluations describe the exact methods and timelines to be followed.

Every new member of the faculty and administrator is provided with a complete set of the evaluation system documents and procedures. Additional copies are available from the Office of Academic Affairs, School of Health Professions.
FACULTY HANDBOOK

SECTION 15

THE SYSTEM
FOR EVALUATION OF FACULTY EFFECTIVENESS

The University of Texas
School of Health Professions
At Galveston

The University of Texas Medical Branch at Galveston

(Approved by Faculty, School of Health Professions, March 26, 1981)
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THE SYSTEM
FOR EVALUATION OF FACULTY EFFECTIVENESS

I. INTRODUCTION

The purpose of a faculty evaluation plan is to provide valid data to faculty and administrators for:

1. Motivation of the achievement-oriented faculty member;
2. Reward decisions (salary raises, promotions, tenure);
3. Discipline decisions (static job status, termination); and
4. Faculty development and improvement.

(See McConkey, 1976, Chapter 7)

The purpose of the present document is to describe the essential features of the faculty effectiveness evaluation plan. Topics to be examined are the dimensions of faculty activity, evaluation roles, the evaluation process, and techniques for measurement of faculty performance.

It should be emphasized that this system is based on a major premise related to the concept of professional contracting. Evaluation of faculty effectiveness must be based on a good faith relationship between the faculty member and the School. If an individual has agreed to fulfill certain responsibilities, it is those exact responsibilities which should be evaluated. The expectations for performance should be based on the initially agreed upon objectives. The evaluation is then based on a matching between the objectives and the performance. This is the basis of evaluation of student performance in course work. A teacher identifies the objectives and tests or evaluates according to the performance or accomplishment of the objectives. Thus every faculty member develops a description of activities with the supervisor. The Annual Description of Faculty Activities will include the goals and objectives for the faculty for the coming academic year. The document will specifically include identification of percentages of effort to be dedicated to various areas of responsibility, and methods by which performance will be evaluated. The areas or categories of responsibility are described in this document. Methods of evaluation are identified.

Every faculty member will have an evaluation folder kept confidential by the supervisor in which all Annual Descriptions of Faculty Activities and evaluation material will be accumulated. Once all of the evaluation procedures are completed for a year, the supervisor will compile the results and assess the year’s performance. After review of the performance achieved by the faculty member for several years and consideration of the School standards for faculty ranks, the supervisor will submit the evaluation folder and recommendations to the School AP&T Committee. In expectation of evaluation for personnel decisions (promotion and tenure), it is assumed that the faculty member will assemble and then submit supporting material to be placed in the evaluation folder. These materials will be identified as to the area of evaluation to which they apply.

(Revised May, 1993)
In an evaluation procedure, identification of evaluators and rules for confidentiality are important. Knowledge of the contents of the evaluation folder should be known only to the faculty member, supervisor, and the AP&T Committee. Those evaluators who contribute certain elements (students, peers, etc.) will have knowledge of only their own parts. In a school component (department) it is recommended that peer evaluators be drawn from inside and outside the component. Ideally, two members can be drawn from the component and two members from outside the component but within the School of Health Professions. Evaluators from outside the School may be utilized in certain cases such as: the evaluation of highly specialized scholarly activity or the evaluation of clinical coordination duties performed off-campus.

II. DIMENSIONS OF FACULTY ACTIVITY

A. Categories for Evaluation:

The range of activities in which a faculty member may engage is categorized as follows:

1. Teaching
2. Scholarly Activity
3. Service (Professional and Community)
4. Administration

Although all faculty activities are expected to lie in at least one of these categories, some may logically fit in more than one. For example, materials produced for teaching a course may also provide the basis for a textbook which is scholarly activity. The particular category chosen is not critical. What is more important is that the value of every faculty activity is acknowledged.

B. Faculty Development/Continuing Education Activities:

A Special Case:

The process of evaluation can be applied to any activity, any goal or any objective. However for purposes of personnel decision making, (promotion, tenure) evaluation must be focused primarily on performance of agreed upon responsibilities and activities. An important special case lies in the area of faculty development or continuing education. Certainly, development or self-improvement activities are important to the person, the department and the institution. However, they cannot themselves constitute a major area of faculty activity. They can be evaluated only as they may indirectly contribute to improved performance. Since substantial self-development (courses, seminars, etc.) is to be encouraged, the activities should be recognized but only in a limited way in the evaluation process. Faculty development can and should be built into the Annual Description of Faculty Activities system. A faculty member may plan with the supervisor to spend significant time and effort on developing a new skill (e.g. use of computers in instruction) or improvement of another (teaching effectiveness) in a given year. These developmental efforts should be reflected over a period of years in increased performance/productivity. Thus over a period of years, developmental activities can indirectly enter into evaluation for promotion and tenure in a substantial way.

III. EVALUATION ROLES

A. The Evaluators:

(Revised May, 1993)
Individuals who are able to evaluate different aspects of a faculty member's performance are categorized as follows:

1. The faculty member;
2. Students of the School of Health Professions;
3. Peers (fellow faculty of the School of Health Professions);
4. Administrators (Chairpersons, Assistant Deans, Dean); and
5. External consultants. This is a general category encompassing all evaluators external to the School of Health Professions including individuals from other units of UTMB and from other institutional organizations.

The role of the evaluator in the present context is to provide valid data for the reward and discipline decisions made by supervisors and for guiding development actions. Thus, the role of evaluator is distinguished from the role of decision maker. The categories of faculty activity and of evaluators are combined in a matrix presented in Table 1. The matrix provides a framework for developing criteria for evaluating performance, a use proposed by Ketefian (1977). Explanation of the entries within the boxes of the matrix is provided in subsequent sections of this document.

B. Self-evaluation; A Special Case:

While private self-evaluation is probably ubiquitous, systematic, formal self-evaluation is uncommon. Research shows (Centra, 1979) that while self-evaluation should probably not be used for personnel decision making it does have other important functions. It can play a critical role in self-improvement efforts. Furthermore, in the development of the Annual Description of Faculty Activities between faculty member and supervisor, the faculty member must be in a position to identify the areas which need more time and effort. Self-evaluation of all areas is important in setting the objectives of the faculty member for the year(s) ahead.

However, in terms of identification of evaluators for personnel decisions (promotion, tenure) self, as evaluator, has been excluded.

(Revised May, 1993)
Table 1

A copy of this chart is available through your departmental secretary.

(Revised May, 1993)
IV. THE FACULTY EVALUATION PROCESS

A. Principles of Management by Objectives:

The process whereby faculty of the School of Health Professions will be evaluated under the system is based upon the principles of management by objectives (MBO). McConkey (1975) defines MBO as follows:

MBO is a systems approach to managing an organization - any organization. It is not a technique, or just another program, or a narrow area of the process of managing. Above all, it goes far beyond mere budgeting even though it does encompass budgets in one form or another.

First, those accountable for directing the organization determine where they want to take the organization or what they want it to achieve during a particular period (establishing the overall objectives and priorities).

Second, all key managerial, professional, and administrative personnel are required, permitted and encouraged to contribute their maximum efforts to achieving the overall objectives.

Third, the planned achievement (results) of all key personnel is blended and balanced to promote and realize the greater total results for the organization as a whole.

Fourth, a control mechanism is established to monitor progress compared to objectives and feed the results back to those accountable at all levels.

At the core of MBO is a set of assumptions concerning people, particularly professionals, in modern organizations (Webber, 1975):

1. Professionals are motivated by higher-level needs for achievement, competence, and autonomy;
2. Given an opportunity, mature individuals will satisfy these needs through their work;
3. Professionals have substantial knowledge and competence to contribute to management;
4. Professionals will work harder, make a greater commitment, and perform better if they determine their own objectives; and
5. They will modify their own behavior.

To make these assumptions concerning the faculty of the School of Health Professions appears to be valid.

B. Development of the Annual Description of Faculty Activities

The manner in which the principles of MBO may be applied to faculty evaluation is outlined in Figure 1 (See Pierce and Schroeder, 1974, for a similar application).

(Revised May, 1993)
The process begins with statements of goals and plans by the faculty member's supervisor. These strategic plans must function as the primary guides integrating the specific objectives of individual faculty members (Webber, 1975, Chapter 16; DiBaggio, 1977; Keith, Weiss and Leo, 1977).

The faculty member and the supervisor meet with the goal of agreeing upon:

1. The specific objectives to be accomplished in the coming year;
2. The methods for accomplishing the objectives;
3. The types of evidence for determining whether the objectives have been attained; and
4. Mechanisms for identification of evaluators for appropriate areas.

In the event of disagreement of the faculty member and chairperson, the Dean is in the position to arbitrate. A crucial responsibility for the supervisor and faculty member is that the criteria for achieving the objectives are explicit (Guild, 1977; MacKenzie, 1977; Pierce and Harmon, 1974; Webber, 1975).

Setting objectives and criteria for faculty is analogous to course objectives used for students. The faculty member knows what is expected of him/her and how performance of those responsibilities will be evaluated.

Agreement of the faculty member and the supervisor(s) yields the Annual Description of Faculty Activities. Implementation of the plan specified in the Annual Description of Faculty Activities begins with the new academic year. Achievement of the objectives will be facilitated by periodic feedback to the faculty member from the evaluators (self, students, peers, administrators, consultants) (Guild, 1977). Such feedback can aid in faculty development (Dressel, 1976; Miller, 1972) and as a method of quality assurance in that serious problems may be discovered early. On the other hand, Webber (1975) states that too frequent checks by the supervisor may undermine the subordinate's autonomy in achieving objectives. Webber suggests that frequent casual and spontaneous discussions of the subordinate's progress are most effective. The establishment of target dates for product development is also suggested as an aid to planning work flow and accountability.

(Revised May, 1993)
Unforeseen events may significantly alter a faculty member’s activity. For example, because of illness of one faculty member, another faculty member may be required to assume responsibility for an additional course. An increased load of this size can impair achievement of other objectives. Renegotiation of the Annual Description of Faculty Activities to reflect the new duties will make explicit the new goals and priorities and will protect the faculty member.

The degree to which the year’s objectives have been achieved, as assessed by the evaluators will function as input for the critical decisions on rewards (raises, promotions) and discipline (static job status, discharge).

The entire evaluation process necessitates a significant time commitment by faculty and supervisors. In essence these activities are administrative activities engaged in by each faculty member.

V. MEASUREMENT OF FACULTY PERFORMANCE

The wide range of activities and evaluation roles identified above necessitate the development of reliable and valid measurement instruments. Research in the assessment of faculty effectiveness has been directed mainly towards teaching effectiveness as assessed by students (see reviews by Costin, Greenough & Menges 1971; Feldman, 1977). Less research has been done on evaluation of teaching by raters other than students (Batista, 1976; Centra, 1975) or evaluation of nonteaching activities (see Goff, Festa & Goff, 1978; Genova, Madoff, Chin & Thomas, 1976). Nevertheless, it is possible to identify dimensions of faculty activity and suggest methods for measuring faculty performance along those dimensions.

A. Evaluation of Teaching:

1. Direct Teaching (Didactic and Clinical):

   a. Evaluation by Students: Ideally, evaluation of teaching effectiveness should be based on an estimation of student learning. Unfortunately, in most situations it is very difficult, if not impossible, to clearly and objectively examine this relationship. There are too many undefinable parameters and variables. On the whole, regarding the teacher’s effectiveness in the classroom (Genova et al, 1976). If student ratings are to play a major role in evaluating faculty effectiveness one must examine their reliability and validity. Reliability implies consistency. One must be confident that students would repeatedly rate the faculty member at the same level for a given course.

(Revised May, 1993)
A copy of this chart is available through your departmental secretary.
Research indicates (Centra, 1979) good reliability in student ratings providing there are enough students in the class. For small student groups it is necessary to pool data from several classes. Student comments have been found to correspond to numerical ratings (Leonard, Marion and Niebuhr, 1985). Are the ratings valid? Do the student evaluations in fact reflect a valid assessment of teaching effectiveness? The greatest body of research (Sullivan and Skanes, 1974; Centra, 1977) in this area indicates that student ratings are valid. In the study by Centra (1977) students were assigned at random to multi-section courses in which a common final exam was used. Student evaluation of teachers in specific sections were correlated with student achievement on the final exams. The analysis revealed a significant relationship between student ratings of teaching effectiveness and student achievement. The best correlations were consistently found between global (overall) assessments of teaching effectiveness and student achievement. Characteristics of the teacher which relate to style of teaching were less positively correlated. Style characteristics include items such as teacher-student rapport and speaking abilities.

Research tells us that student estimates of overall (or global) teaching effectiveness are valid but that estimates of instructional style may, but do not necessarily, correlate with teaching effectiveness. For purposes of personnel decision making, the School of Health Professions uses a standard form: the Primary Instructor Evaluation Form. This form includes questions on the overall effectiveness, organization of material, nature of tests and grading system. Additional questions may be added to a second form tailored to departmental and individual wants and needs. The standard form is institutionally administered and then becomes a confidential part of the Evaluation Folder. A second form may be administered by the department to be used chiefly for self-improvement or faculty development purposes. The Primary Instructor Evaluation Form should also be used for teachers in clinical settings, if appropriate. The global questions eliminate many considerations which are specific to classroom settings. Characteristics of students such as sex, GPA, grade expected and teacher characteristics such as sex and academic rank generally have been found to have no significant correlation with student ratings (Centra and Creech, 1976). Studies which compared alumni ratings with student ratings found no significant differences (Centra, 1973; Lanier and Niebuhr, 1979). These results would seem to rule out the need for cumbersome alumni assessments of direct teaching effectiveness.

(Revised May, 1993)
b. **Evaluation by Peer**: Faculty peers have much less contact with anothers’ teaching than do students. Because of the limited amount of time involved, classroom observation by peer raters has not yielded reliable measurement (Centra, 1975; Kulik & McKeachie, 1975). While multiple classroom visits may tend to improve reliability, the necessary long term time commitment is probably not feasible and may still not be highly reliable.

Peer evaluation of teaching material is recommended by several authors (Centra, 1975; Dressel, 1976; Genova et al., 1976; Miller, 1972). Appropriate areas for peer evaluation are syllabi or outlines, choice of text and readings, objectives, and examinations. These materials can be evaluated utilizing form 2.D. Circumstances can necessitate use of external peers for peer evaluation of teaching materials. Such circumstances could include lack of faculty with a certain specialized expertise or smallness of departments. In these cases it is essential that the external peer be made familiar with the School of Health Professions including the types of student, level of academic background, nature of professional curriculum, etc.

2. **Indirect Teaching:**

This sub-category includes responsibilities such as curricular planning and revision, development of new courses; development of specialized instructional materials (modules, self-instructional units, films, etc.). In this area, faculty would submit evidence of work to be placed in the Evaluation Folder. Peer and supervisory ratings of submitted materials will be required. See comments above, in section 1b, regarding use of external evaluators. Student evaluation of specific instructional tools (e.g. modules) should be obtained. Form 2.C may be used.

3. **Advisement and Counseling:**

For most faculty members, this sub-category includes counseling of assigned students in the departments. As set out in the Annual Description of Faculty Activities, did the faculty member meet with assigned students, were the meetings viewed as successful (according to departmental objectives) by the supervisor, peers, students? For some faculty, such as those in the Office of Student Affairs, this category may become a major part of the overall evaluation. Form 1.G may be used.

(Revised May, 1993)
4. Clinical Coordination:

Within departments, certain faculty members function chiefly as the "Clinical Coordinator" of clinical learning experiences of students. In these cases, this sub-category becomes a major focus of attention.

Evaluators include supervisor, the students (form 1.C), and the clinical teachers out in the field who are being coordinated (form 2.B). This activity is to be included in the administration area instead of the teaching area.

B. Evaluation of Scholarly Activity:

1. Definition of Scholarly Activity:

The term "research" is often used in a limited sense to describe the production of new knowledge in a particular discipline. A broader definition of scholarly activity by the allied health educator is used in this document. Scholarly activity may be categorized as original research, educational research, or institutional research.

Original research, the production of new knowledge within a discipline, may be basic or applied (i.e. clinical). Educational research, which may take the faculty outside of his/her own discipline, is designed to improve curriculum, teaching and learning. Institutional research is that which has an administrative or managerial purpose.

The three categories of scholarly activity are not mutually exclusive. For example, an occupational therapist may conduct a project on training in rehabilitation techniques which could be categorized as original or educational research.

2. Sources of Evidence:

Sources of evidence which a faculty member may submit to document scholarly activity include, but are not limited to:

a. Articles in refereed journals.
b. Articles in non-refereed journals.
c. Books (technical or text).
d. Book chapters.
e. Conference proceedings.
f. Nonprint media (films, tapes, etc.).
g. Presentation at professional meeting of competitively selected papers.
h. Other presentations at professional meetings.
i. Manuscripts and other unpublished papers.
j. Grant proposals, progress reports, and other research proposals.

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3. Evaluation of Evidence:

Evaluation of the quality of the scholarly activity of a faculty member can only be done by those individuals knowledgeable and competent in the subject area. Typically, these individuals will be the members and chairperson of the faculty member's department. Knowledgeable individuals outside of the department, school, or university may also be requested to evaluate manuscripts or other evidence submitted. Form 3.A. may be used.

C. Evaluation of Service:

1. Definition of Service:

"Service", as used in this evaluation document will be recognized as a contribution to the community or to the one or more professional organizations of which an individual is a member. Institutional or School activities would be within the scope of the category, "Administration."

2. Scope:

a. Community/Public: Involvement in community activities to provide positive attitude toward UT/UTMB/SHP.

   1. Active participant in organization
   2. Contributor

b. Professional (local, regional, state, national, international):

   1. Membership in organizations.
   2. Participation:
      a. Elected officer
      b. Appointed officer
      c. Committee activities
         (1) Chairperson
         (2) Member
   3. Awards:
      a. Meritorious service
      b. Other recognition

(Revised May, 1993)
4. Consultation:
   a. Educational programs (including preparation and presentation of workshops)
   b. Health care delivery facilities
5. Other activities:
   a. Site visitor for accreditation/credentialing
   b. Participant in professional program

3. Evaluation of Evidence:

   Evaluation of the quality of service performed by a faculty member can be accomplished only by those individuals knowledgeable of the related area(s). Final definition must rest with the faculty member and the supervisor when formulating the yearly Annual Description of Faculty Activities. Those who might serve as evaluators could include the following: peers and supervisor (assessing the value of the service to UT/UTMB/SHP/Dept. from the perspective of members of the related profession); and external consultants including members of the profession not in the SHP, representative of community groups and the public, and clients of consultation.

D. Evaluation of Administration:

   Evaluation of administrative activities is conducted for one of the following reasons:

1. To evaluate the administrative areas which are part of a faculty member's total responsibility. This evaluation then forms part of the overall evaluation of a faculty member's effectiveness for appointment, promotion, tenure decisions and for faculty development. For a faculty member with an administrative title, this category will become a major focus of evaluation procedures.

2. To evaluate the effectiveness of an individual in a position with an administrative title (Dean, Assistant Dean, Chairperson, etc.) for appointment and reappointment decisions only.

   Evaluation of administration as an area of a faculty member's responsibility

   a. Chairperson/member School committee.
   b. Chairperson/member departmental committee.
   c. Intra-departmental coordinator of special activity (planning, grant writing, coordinator of clinical affiliations, practica).
   d. Chairperson/member of special School-wide ad hoc committees, task forces.
   e. Chairperson/member UTMB committee.
   f. Administrative activities which accompany assumption of an administrative title by a faculty member.

(Revised May, 1993)
Evaluation of performance of items "a-d" (above) is based primarily on evidence to be submitted to the supervisor by the faculty member. Evidence can include: identification of recommendations made by a committee, actions taken, reports prepared or presented, copies of grants written. This supporting evidence must be evaluated by peers/supervisor utilizing form 5.C. For evaluation of item "f" see following paragraph, Evaluation of Positions with Administrative Titles.

Evaluation of Positions with Administrative Titles

This section can be used alone, as a guideline for evaluating administrators for purposes of reappointment only. The evaluation of administration as a major job responsibility requires a comprehensive analysis of the complex facets of function which will vary widely with different positions. In the SHP, these positions include: the Dean, the Associate Deans, Chairpersons, and Director of Learning Resource Center. The person in each position would work with the supervisor in order to identify the job-specific activities and responsibilities to be evaluated.

a. **Guidelines for Establishment of Criteria:** Anderson (1975) has proposed some general criteria for evaluation of administrators:

1. Performance as an educational leader.
2. Performance as manager.
3. Administrative style.
4. Educational statesmanship.
5. Political, social, economic acumen.

Educational leadership requires performance of a mixture of activities which are necessary to maintain, enhance or interpret the function of the school, office or department. This could include such duties as supervision of student life and formulation and supervision of instructional and research programs. These activities may require interaction with a wide spectrum of individuals (external and internal) to the school, department, etc.

Managerial skills are those that are necessary to perform such tasks as budget preparation and control, personnel recruitment and guidance, effective prioritization of responsibilities. Efficiency of task completion is also important here.

Administrative style includes such characteristics as communication skills, personal visibility, productive conflict management and resolution, personal style and candor during interaction with faculty, students, staff and other administrators. Educational statesmanship can be considered part of administrative style. Educational statesmanship refers to characteristics such as commitment to academic freedom, personal integrity, and use of consultation and willingness to accept advice.

(Revised May, 1993)
Political acumen relates to sensitivity to issues involved in, and the potential effects of institutional, departmental, etc. decision making. Interactions of all types, intra-departmental, interdepartmental, on-campus, off-campus are important.

b. Types of Data. Identification of Evaluators: In order to generate data on the level of performance in the areas described above, a group of evaluators and specific items in the general areas, must be identified. Recall that the administrator and the supervisor will have prepared an Annual Description of Faculty Activities at the time of appointment identifying these specific items of responsibility. The data will be of three general types:

1. Judgmental.
2. Objective measurement.

Evaluators would include individuals from the following categories: supervisor, peers (both administrative and administrative faculty members), secretaries, students and other specialized or technical support staff. The administrator would identify a group of individuals in each category. The supervisor would then choose the evaluator(s) from each category who could then remain anonymous, where possible (as discussed in the Introduction).

Concerning judgmental input, evaluators from all categories would be given an evaluation form utilizing 5 point rating scales. Questions would center on global evaluations of overall effectiveness. In addition, certain specific items could be included which might be directed toward the criteria discussed earlier.

Objective measurements, where possible, would be job-specific and might include items such as: student enrollments, grant income, faculty/staff turn-over, student drop-outs. This information is to be collected by a supervisory staff member.

Knowledge and skills would also be job-specific and would include estimation of items such as: knowledge of personnel review, knowledge of teaching and research evaluation methods, general sense of money success. This area is probably best evaluated by a panel of peers/supervisors, selected from the list of individuals submitted by the administrator utilizing form 5.B.

c. Decision Making: The final evaluative decision on the performance of an administrator for purposes of reappointment and reward would be based on a composite folder of:

1. Judgmental input from the various categories of evaluators identified above.
2. Data on objective measurements (if applicable).
3. Report from a panel selected to evaluate job-specific knowledge and skills.

VI. REFERENCES


(Revised May, 1993)


(Revised May, 1993)


(Revised May, 1993)
VII. STANDARD OPERATING PROCEDURE (SOP)
SYSTEM FOR EVALUATING FACULTY EFFECTIVENESS

GUIDELINES

Part 1.

General Guidelines

1. All faculty and supervisors should adhere to the time schedule described in "WHEN TO ADMINISTER FORMS" (SOP, Part 2).

2. All peer faculty and supervisors identify themselves by social security numbers (last six digits only) when functioning as evaluators.

3. A copy of the summary evaluative data will be sent to the faculty member and to his/her supervisor. It is the responsibility of the faculty member to submit the data summaries to the AP&T Committee when requests for tenure and promotion considerations are made. A faculty member has the right to request the supervisor or the Dean (or his designate) to verify the accuracy of data tabulation. All "Comments" sections will be listed verbatim with the numerical data summaries. Comments will not be abbreviated in any way.

4. Any peer evaluation received after specified timeline will not be included in the data tabulation for that academic year. It will be processed the following year. Peer evaluations for faculty applying for tenure will be tabulated and processed.

5. Faculty should familiarize themselves with the procedures for administration of student evaluations (SOP, Part 3).

6. If a course coordinator actually presents or teaches 25% or more of the course content, student evaluation of instructor must be utilized in addition to forms 1.D, and 2.A (evaluation of course coordinator by students and faculty contributors to course.)

7. All student evaluations of instructors will be tabulated in the Office of Academic Affairs and a summary will be sent to the faculty member and supervisor within three weeks following the end of each academic term or as soon as possible. The "Comments" section will be handled as described above in number 3 of these "Guidelines."

8. Any student evaluation received after specified timeline will not be included in the data tabulation for that semester. It will be processed at the end of the following semester.

(Revised May, 1993)
Specific Faculty Roles

9. It is the responsibility of the faculty member to:

   a. Identify which evaluation forms will be needed in order to evaluate the activities listed in the "Annual Description of Faculty Activities" for the year under consideration, as required by the "System for Evaluation of Faculty Effectiveness" and as voted and accepted by the faculty.

   b. Fill out the top of each form completely including such items as academic year, course name and number, scholarly work and bibliographic reference, description of professional service or consultation, committee name, department or school, etc.

   c. Give the forms to the supervisor, who will select the evaluators from the listing provided and distribute the forms to evaluators.

10. Peer Evaluation of Instruction Materials (form 2.D.) need not be carried out every time a course is offered. Faculty members should use their own judgment and submit these materials for evaluation only when significant revision has occurred. When form 2.D is used, the faculty member should be sure to fill out the top of the form completely and check off (item I on form) those materials included in the packet for evaluation (the evaluator then will fill out Part II and III of the form). The faculty member should submit the evaluation forms and the packets of materials to the supervisor who will distribute them for evaluation.

11. Each year, faculty members should choose a maximum of three major committees served on for peer evaluation. It is not necessary to evaluate committee service for every committee participated in every year. For example, if serving a two year or longer term, a faculty member could choose to do the evaluation in the second year. If a request for promotion or tenure consideration is imminent, more frequent evaluations may be done.

Specific Supervisor Roles

12. Departmental chairpersons will identify a student who will administer student advisement evaluation forms in a class section (or other group session), collect them in labeled, sealable envelopes to insure confidentiality, and them promptly deliver them to the Office of Academic Affairs (Room 4.218). With the exception of the circumstances given below, only senior students should fill out these forms and only one time, just prior to graduation (see SOP Part 2, "WHEN TO ADMINISTER FORMS"). In the event a student changes advisors, the student should be given the form at the next available group administration of the forms. In total, each student will complete only one advisement form for each advisor.

13. For each faculty activity requiring peer evaluation, the supervisor is to select three individuals from the pool of evaluators identified in the Annual Description of Faculty Activities for the year under consideration. Supervisors are encouraged to select

(Revised May, 1993)
evaluators outside of the department and school as well as from within. There may be instances, such as in evaluation of professional services, that it will be impractical to secure three evaluations. In the case of evaluation of committee activity, the supervisor will identify the evaluators from departmental committees and from a membership list of school committees as identified in the "Faculty Handbook." Alternates should not function as evaluators. The supervisor should secure the consent of "outside" peer evaluators (who are not faculty within the School), send them the form letter of explanation of the evaluation system (available in the Office of Academic Affairs) along with the appropriate form. The form letter is only used for "outside" peer evaluators.

It is not necessary to secure the prior consent of peer evaluators within the School since it is assumed that all School faculty are participants in the system. However, upon receipt of an evaluation form, a faculty evaluator may decline if he/she feels unqualified to complete the form. In this case, the evaluator should send it back to the supervisor with an explanation.

(Revised May, 1993)
Part 2.

WHEN TO ADMINISTER FORMS

1. Teaching:

Student evaluations of primary instructor, secondary instructor, course coordinator, clinical/practicum coordinator, small group leader, practicum coordinator, and student evaluation of faculty advisement should be administered in a class period prior to the Final Examination (if given), but within the two week period before Final Examinations or completion of a course section, unit or clinical experience (including CORE courses).

Any evaluation received after specified timeline will not be included in the data tabulation for that semester. It will be processed at the end of the following semester and then only if there is more than one available to tabulate. This is to preserve confidentiality of evaluators.

"Student Evaluation of Faculty Advisement" (form 1.G.) should be administered either before students leave on affiliations or when they return during senior week. Forms completed at that time should be submitted to the Office of Academic Affairs (Room 4.218) as soon as they are completed. Student Evaluation of Faculty Advisement will adhere to the same deadline as the regular student evaluations.

Peer and supervisory evaluation of course materials (clinical and didactic, form 2.D.; See General Guidelines numbers 7 and 8), and course and clinical coordinators (forms 2.A. and 2.B.) should be administered and returned to the Office of Academic Affairs (Room 4.218) by the evaluators within three weeks following the end of a course, course section or clinical experience.

"Evaluation of Self-Contained Instructional Project" (form 2.C.) should be initiated no later than June 15. All completed evaluations should be returned to the Office of Academic Affairs (Room 4.218) by the second week of August, but no later than August 15. The exact date that forms are to be returned is determined each year and faculty will be advised of this date by memorandum in early June each year.

2. Scholarly Activity

Forms 3., 4.C., 5.A., 5.C., and 2.C. relate to peer and supervisory evaluation of scholarly activity, service and administration activities performed or produced in the year under consideration only. These forms should be administered once a year during the month of June. Evaluators should return the forms to the Office of Academic Affairs (Room 4.218) by the end of the second week of August, but no later than August 15th. If a special project, scholarly work or professional service is completed early in the year, the evaluation can be performed at that time, at the initiation of the faculty member (See General Guidelines numbers 7, 9, and 11 for responsibilities of faculty member and supervisor).

3. Service

Part 3.

(Revised May, 1993)
PROCEDURES FOR ADMINISTRATION OF FORMS
FOR STUDENT EVALUATION OF:

PRIMARY INSTRUCTORS,
SECONDARY INSTRUCTORS,
COURSE COORDINATORS,
CLINICAL/PRACTICUM COORDINATORS,
SMALL GROUP LEADERS,
AND
PRACTICUM COORDINATORS

Faculty are responsible for completing the information above the dotted line of each form requested and return of the forms to the departmental secretary. The departmental secretary will then prepare a typewritten copy for verification by the faculty member. Each person whose name appears on a form, signs the form and writes the number of copies needed on the back of the verified copy. The signed forms are transmitted by the departmental secretary to the Office of Academic Affairs (Room 4.218) which is responsible for providing the requested number of forms back to the department prior to the end of the term or, upon request for off-cycle courses. Prior to the Final Examination, final test, or completion of a course section or clinical experience, a class period should be selected by the primary instructor of the course and the forms administered to the students. The forms are to be administered only once to each section and only to those students present. **Unused forms are to be returned along with the completed forms.**

The administration of the evaluation forms should proceed as follows:

1. The faculty member should **read to the class the statement** at the top of the form.

2. The faculty member should distribute (face down) one form to each student.

3. The faculty member should be certain that a separate form is utilized for each instructor in a team-taught course.

4. The faculty member will leave the room while evaluations are being completed and collected by the appointed student. The student will invite the instructor back in after the evaluations are collected.

5. The faculty member should identify a student who will be responsible for collecting and returning the forms to the Office of Academic Affairs (Room 4.218). The faculty member must assure that the student representative places all evaluations (completed or unused) in an envelope, **sealed** (not just closed with a clasp) and signed by the student who has been assigned for returning them to the Office of Academic Affairs.

6. For students taking classes on weekends or at night, student evaluations of faculty should be returned to Room 4.218 by sliding the packet under the door.

7. Additional private or departmental evaluation forms or questionnaires may be administered but only at a **later** class period.

(Revised May, 1993)
## SHP Faculty Evaluation Forms

<table>
<thead>
<tr>
<th>Form No.</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.A. (White)</td>
<td>Student Evaluation of Primary Instructor</td>
</tr>
<tr>
<td>1.B. (Blue)</td>
<td>Student Evaluation of Secondary Instructor</td>
</tr>
<tr>
<td>1.C. (Yellow)</td>
<td>Student Evaluation of Clinical/Practicum Coordinator</td>
</tr>
<tr>
<td>1.D. (Green)</td>
<td>Student Evaluation of Course Coordinator - Indirect Teaching</td>
</tr>
<tr>
<td>1.E. (Buff)</td>
<td>Student Evaluation of Practicum Coordinator</td>
</tr>
<tr>
<td>1.F. (Pink)</td>
<td>Student Evaluation of Small Group Leader</td>
</tr>
<tr>
<td>1.G. (Buff)</td>
<td>Student Evaluation of Adviseement by Faculty</td>
</tr>
<tr>
<td>1.H. (White)</td>
<td>Evaluation of Instructor in Independent Study or Self-Paced Course</td>
</tr>
<tr>
<td>2.A. (White)</td>
<td>Course Contributor's Evaluation of Course Coordinator</td>
</tr>
<tr>
<td>2.B. (Pink)</td>
<td>Evaluation of SAHS/UTMB Clinical Coordinator by Off Campus Site Personnel</td>
</tr>
<tr>
<td>2.C. (Yellow)</td>
<td>Indirect Teaching: Evaluation of Self-Contained Instructional Project</td>
</tr>
<tr>
<td>2.D. (Green)</td>
<td>Direct Teaching: Evaluation of Instructional Materials (Didactic and Clinical Teaching)</td>
</tr>
<tr>
<td>3.A (White)</td>
<td>Evaluation of Scholarly Works</td>
</tr>
<tr>
<td>3.B. (White)</td>
<td>Evaluation of Grant/Proposal/Contract Contributions</td>
</tr>
<tr>
<td>4.A. (Pink)</td>
<td>Evaluation of Clinical/Patient Care</td>
</tr>
<tr>
<td>4.B. (Yellow)</td>
<td>Evaluation of Community Service</td>
</tr>
<tr>
<td>4.C. (Blue)</td>
<td>Evaluation of Professional Organization Services</td>
</tr>
<tr>
<td>5.A. (Green)</td>
<td>Committee Membership</td>
</tr>
<tr>
<td>5.B. (White)</td>
<td>Administrative Effectiveness in an &quot;Administrative Job Position&quot;</td>
</tr>
<tr>
<td>5.C. (Blue)</td>
<td>Administrative Effectiveness of Faculty with Major Administrative Responsibility or Projects</td>
</tr>
</tbody>
</table>
1.A. PRIMARY INSTRUCTOR EVALUATION FORM

This form is used by the School to monitor quality of instruction. Please take it seriously and answer each item to the best of your ability; the results are important to the School and the instructor involved. This information will be used for decisions concerning the reappointment, promotion and tenure of this faculty member. You are responsible for your evaluation and you should not discuss it in a group. The confidentiality of your response is protected in that the forms are placed in the envelope provided, signed and sealed by one of you, and delivered by that student to the Office of Academic Affairs (Room 4.218 SHP/SON Bldg.). Thank you for your cooperation.

INSTRUCTOR: _________________________  SEMESTER: _________  YEAR: _______

COURSE/IDENTIFICATION:   PREFIX: _______________  NUMBER: ________________

STUDENT'S DEPARTMENT: ____________________________________________________________________

Indicate your level of agreement with each statement by circling the appropriate response.

KEY: SA=Strongly Agree, A=Agree, N=Neutral, D=Disagree, SD=Strongly Disagree

<table>
<thead>
<tr>
<th>The instructor</th>
<th>SA</th>
<th>A</th>
<th>N</th>
<th>D</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Presented a well-organized course.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>2. Is knowledgeable and current in the subject.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>3. Presented the material in a thought-provoking manner which challenged and motivated me to learn.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>4. Was well-prepared for class meetings and used time effectively.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>5. Was dynamic, enthusiastic and enjoyed teaching the subject matter.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>6. Presented information clearly and understandably.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>7. Provided positive feedback and encouragement.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>8. Evaluated student performance fairly, based on course objectives and assignments.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>9. Was available and willing to spend time with students when problems arose.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>10. Was effective, overall, as a teacher.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

COMMENTS: (Use back of page for additional space if needed)
1.B.
SECONDARY INSTRUCTOR EVALUATION FORM

This form is used by the School to monitor quality of instruction. Please take it seriously and answer each item to the best of your ability; the results are important to the School and the instructor involved. This information will be used for decisions concerning the reappointment, promotion and tenure of this faculty member. You are responsible for your evaluation and you should not discuss it in a group. The confidentiality of your response is protected in that the forms are placed in the envelope provided, signed and sealed by one of you, and delivered by that student to the Office of Academic Affairs (Room 4.218 SHP/SON Bldg.). Thank you for your cooperation.

INSTRUCTOR: ______________________________  SEMESTER: _________  YEAR: _______

COURSE/IDENTIFICATION:  PREFIX: _______________  NUMBER: ________________

The activities indicated below were provided by the secondary instructor in this course.

Presented lectures
Provided laboratory supervision
Provided laboratory demonstration
Facilitated/critiqued case presentation
Facilitated/critiqued small group sessions
Facilitated/critiqued problem solving sessions
Administered laboratory practical examinations
Assisted with laboratory practical examinations

STUDENT'S DEPARTMENT: __________________________________________

Rate the Secondary instructor as indicated below. If any item does not apply leave it blank. Indicate your level of agreement with each statement by circling the appropriate response.

Key: SA=Strongly Agree, A=Agree, N=Neutral, D=Disagree, SD=Strongly Disagree

<table>
<thead>
<tr>
<th></th>
<th>SA</th>
<th>A</th>
<th>N</th>
<th>D</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>The instructor presented the material in an organized manner.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>The instructor was prepared for class activities.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>The instructor contributed to attainment of course goals and objectives.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>The instructor's interactions facilitated student learning.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Overall the instructor was effective.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

COMMENTS: (Use back of page for additional space if needed)

(Revised August, 1990)
STUDENT EVALUATION OF CLINICAL/PRACTICUM COORDINATOR

This form is used by the School to monitor quality of instruction. Please take it seriously and answer each item to the best of your ability; the results are important to the School and the instructor involved. This information will be used for decisions concerning the reappointment, promotion and tenure of this faculty member. You are responsible for your evaluation and you should not discuss it in a group. The confidentiality of your response is protected in that the forms are placed in the envelope provided, signed and sealed by one of you, and delivered by that student to the Office of Academic Affairs (Room 4.218 SHP/SON Bldg.). Thank you for your cooperation.

INSTRUCTOR: ______________________________  SEMESTER: _________  YEAR: _______
COURSE/IDENTIFICATION:  PREFIX: _______________  NUMBER: ________________

STUDENT'S DEPARTMENT:________________________________________________________

KEY:  SA=Strongly Agree, A=Agree, N=Neutral, D=Disagree, SD=Strongly Disagree, NA/UE=Not Applicable/Unable to Evaluate

Indicate your level of agreement with each statement by circling the appropriate response.

<table>
<thead>
<tr>
<th></th>
<th>Orientation for clinical experience was sufficient.</th>
<th>SA</th>
<th>A</th>
<th>N</th>
<th>D</th>
<th>SD</th>
<th>NA/UE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td></td>
<td>Learning experiences were related to instructional objectives.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>2</td>
<td>Coordinator was available for consultation.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>3</td>
<td>Coordinator referred students to pertinent literature or other resources.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>4</td>
<td>Coordinator provided specific practice opportunities.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>5</td>
<td>Coordinator provided helpful feedback and suggestions for improvement.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>6</td>
<td>The course grading system was explained clearly at the start of the course.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>7</td>
<td>Process of clinical/practicum placement was equitable.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
</tbody>
</table>

COMMENTS: (Use back of page for additional space if needed)

(Revised March, 1990)
**1.D. INDIRECT TEACHING**

**STUDENT EVALUATION OF COURSE COORDINATOR**

This form is used by the School to monitor quality of instruction. Please take it seriously and answer each item to the best of your ability; the results are important to the School and the instructor involved. This information will be used for decisions concerning the reappointment, promotion and tenure of this faculty member. You are responsible for your evaluation and you should not discuss it in a group. The confidentiality of your response is protected in that the forms are placed in the envelope provided, signed and sealed by one of you, and delivered by that student to the Office of Academic Affairs (Room 4.218 SHP/SON Bldg.). Thank you for your cooperation.

**INSTRUCTOR: ______________________________  SEMESTER: _________  YEAR: _______**

**COURSE/IDENTIFICATION:  PREFIX: _______________  NUMBER: ________________**

**STUDENT'S DEPARTMENT:______________________________________________________________________________**

Indicate your level of agreement with each statement by circling the appropriate response.

**KEY:  SA=Strongly Agree, A=Agree, N=Neutral, D=Disagree, SD=Strongly Disagree, NA/UE=Not Applicable/Unable to Evaluate**

<table>
<thead>
<tr>
<th></th>
<th>SA</th>
<th>A</th>
<th>N</th>
<th>D</th>
<th>SD</th>
<th>NA/UE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. In the course design, there was logical progression of information.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>2. The course followed the stated objectives in the course syllabus.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>3. The handouts were useful as supplemental learning tools.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>4. The course grading system was explained clearly at the start of the course.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>5. The coordinator was accessible for consultation (e.g., kept appointments, available or returned telephone call, etc.)</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>6. The coordinator evaluated student performance based on course objectives and assignments in accord with the specified grading system.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
</tbody>
</table>

**COMMENTS:  (Use back of page for additional space if needed)**

(Revised March, 1990)
1.E.
STUDENT EVALUATION OF PRACTICUM COORDINATOR

This form is used by the School to monitor quality of instruction. Please take it seriously and answer each item to the best of your ability; the results are important to the School and the instructor involved. This information will be used for decisions concerning the reappointment, promotion and tenure of this faculty member. You are responsible for your evaluation and you should not discuss it in a group. The confidentiality of your response is protected in that the forms are placed in the envelope provided, signed and sealed by one of you, and delivered by that student to the Office of Academic Affairs (Room 4.218 SHP/SON Bldg.). Thank you for your cooperation.

INSTRUCTOR: ______________________________  SEMESTER: _________  YEAR: _______

COURSE/IDENTIFICATION:    PREFIX: _______________  NUMBER: ________________

STUDENT'S DEPARTMENT:______________________________________________________

KEY:  SA=Strongly Agree, A=Agree, N=Neutral, D=Disagree, SD=Strongly Disagree, NA/UE=Not Applicable/Unable to Evaluate

Indicate your level of agreement with each statement by circling the appropriate response.

<table>
<thead>
<tr>
<th></th>
<th>SA</th>
<th>A</th>
<th>N</th>
<th>D</th>
<th>SD</th>
<th>NA/UE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Orientation and education concerning the structure of the practicum, expectations and requirements were sufficient.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>2.</td>
<td>The practicum coordinator advised me and assisted, if necessary on the creation of acceptable practicum objectives.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>3.</td>
<td>The practicum coordinator was available for consultation.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>4.</td>
<td>The practicum coordinator provided helpful feedback, direction and suggestions for improvement as necessary.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>5.</td>
<td>The grading system was explained clearly before the practicum began.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>6.</td>
<td>If I experienced difficulties in obtaining or choosing a valuable practicum site, the practicum coordinator was willing and available to assist me.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>7.</td>
<td>The practicum coordinator was concerned that the practicum experience be as beneficial as possible, and advised me towards that end.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

COMMENTS: (Use back of page for additional space)
1.F. STUDENT EVALUATION OF SMALL GROUP LEADER

This form is used by the School to monitor quality of instruction. Please take it seriously and answer each item to the best of your ability; the results are important to the School and the instructor involved. This information will be used for decisions concerning the reappointment, promotion and tenure of this faculty member. You are responsible for your evaluation and you should not discuss it in a group. The confidentiality of your response is protected in that the forms are placed in the envelope provided, signed and sealed by one of you, and delivered by that student to the Office of Academic Affairs (Room 4.218 SHP/SON Bldg.). Thank you for your cooperation.

INSTRUCTOR: ______________________________ SEMESTER: _________ YEAR: _______

COURSE/IDENTIFICATION: PREFIX: _______________ NUMBER: ________________

STUDENT’S DEPARTMENT: _______________________________________________________

Indicate your level of agreement with each statement by circling the appropriate response.

KEY: SA=Strongly Agree, A=Agree, N=Neutral, D=Disagree, SD=Strongly Disagree
NA/UE=Not Applicable/Unable to Evaluate

<table>
<thead>
<tr>
<th></th>
<th>SA</th>
<th>A</th>
<th>N</th>
<th>D</th>
<th>SD</th>
<th>NA/UE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>2.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
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<tr>
<td>3.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>4.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>5.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
</tbody>
</table>

COMMENTS: (Use back of page for additional space if needed)

(Revised March, 1990)
1.G.

STUDENT EVALUATION OF ADVISEMENT BY FACULTY

This form is used by the School to monitor quality of advisement. Please take it seriously and answer each item to the best of your ability; the results are important to the School and the instructor involved. This information will be used for decision concerning the reappointment, promotion and tenure of this faculty member. You are responsible for your evaluation and you should not discuss it in a group. The confidentiality of your response is protected in that the forms are placed in the envelope provided, signed and sealed by one of you, and delivered by that student to the Office of Academic Affairs (Room 4.218 SHP/SON Building). Thank you for your cooperation.

FACULTY: ___________________________ SEMESTER: ________________

ACADEMIC YEAR: ________________________

STUDENT’S DEPARTMENT: ____________________________________________

I have consulted with my advisor ________________________________ times this semester.

(a=0-5) (b=6-10) (c=11+)

(SA=Strongly Agree, A=Agree, N=Neutral, D=Disagree, SD=Strongly Disagree, NA/UE=Not Applicable/Unable to Evaluate)

<table>
<thead>
<tr>
<th></th>
<th>SA</th>
<th>A</th>
<th>N</th>
<th>D</th>
<th>SD</th>
<th>NA/UE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Scheduled consultations were kept.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>2. Advice given was informative, useful, and appropriate.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>3. Interest was expressed in me as an individual.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>4. I was referred to additional resources when needed.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>5. Follow-up was done to determine the outcome of advice/information/suggestions/recommendations made to me.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>6. I received useful assistance in clarifying my career goals and objectives.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>7. Overall, I have been satisfied with this faculty advisor.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
</tbody>
</table>

COMMENTS: (Use back of page for additional space if needed)
1.H.
EVALUATION OF INSTRUCTOR IN INDEPENDENT STUDY
OR SELF-PACED COURSE

This form is used by the School to monitor quality of instruction. Please take it seriously and answer each item to the best of your ability; the results are important to the School and the instructor involved. This information will be used for decisions concerning the reappointment, promotion and tenure of this faculty member. The confidentiality of your response is protected in that the forms are placed in the envelope provided, signed and sealed, and delivered by a student to the Office of Academic Affairs (Room 4.218 SHP/SON BLDG). Thank you for your cooperation.

INSTRUCTOR: _____________________             SEMESTER:   ___________           YEAR: ______
COURSE/IDENTIFICATION:           PREFIX:    ___________  NUMBER:___________

STUDENT’S DEPARTMENT: __________________________________________________________

I. ROLE: _____ Primary Instructor
       _____ Faculty Mentor, Advisor, Consultant
       _____ Other: Explain:

II. EXPLAIN HOW THE GOALS AND OBJECTIVES WERE ESTABLISHED FOR THE COURSE
       _____ A. Faculty Directed
       _____ B. Student/Faculty Collaboration on a Contract-type Course

RATING:

Indicate your level of agreement with each statement by circling the appropriate response.

KEY: SD=Strongly Agree   A=Agree   N=Neutral   D=Disagree
     SD=Strongly Disagree
     NA/UE=Not Applicable/Unable to Evaluate

I. RATE THE COORDINATOR ON THE BASIS OF THE FOLLOWING:

(Dated July, 1992)
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th>NA/UE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>The coordinator defined the scope of my responsibility in this course.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>2.</td>
<td>The coordinator provided administrative support &amp; equipment (when requested).</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

(Dated July, 1992)
(Revised March, 1990)
NAME: __________________________________________

1.H. Continued

3. The coordinator collaborated with me in planning, implementing, and/or revising the course. 4 3 2 1 0 X  
4. The course was planned and implemented effectively. 4 3 2 1 0 X  
5. A schedule for faculty/student meeting times was established by the end of the second week. 4 3 2 1 0 X  
6. The instructor was available for consultation. 4 3 2 1 0 X  
7. The instructor provided feedback, direction and suggestions for improvement, as necessary. 4 3 2 1 0 X  
8. The instructor presented information clearly and understandably. 4 3 2 1 0 X  
9. The instructor was well prepared for meetings. 4 3 2 1 0 X  
10. The instructor evaluated student performance based on course goals and objectives. 4 3 2 1 0 X  

(Dated July, 1992)
NAME OF COORDINATOR: ________________________________________________________________

COURSE: __________________________________________

SEMESTER: ________________________ ACADEMIC YEAR: _______________________

NUMBER OF LECTURES GIVEN BY THE EVALUATOR OR AMOUNT OF TIME (COURSE, LECTURE, ETC.) CONTRIBUTED BY THE EVALUATOR: ________________________________

For Evaluator Use:

SOCIAL SECURITY NUMBER OF EVALUATOR: ____________________________________________
(Last six digits only of social security number; no names)

EVALUATOR IS: _____ Peer _____ Subordinate _____ Supervisor

_____ In School of Health Professions
_____ Outside School of Health Professions

NOTE: This information will be used for decisions concerning the promotion and tenure of this faculty member.

(SA = Strongly Agree  A = Agree  N = Neutral  D = Disagree  SD = Strongly Disagree
NA = Not Applicable/Unable to Evaluate)

I. RATE THE COORDINATOR ON THE BASIS OF THE FOLLOWING:

<p>| | | | | | | |</p>
<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>1.</td>
<td>The coordinator defined the scope of my responsibility in this course.</td>
<td>SA</td>
<td>A</td>
<td>N</td>
<td>D</td>
<td>SD</td>
</tr>
<tr>
<td>2.</td>
<td>The coordinator provided administrative support and equipment (when requested).</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>3.</td>
<td>The coordinator collaborated with me in planning, implementing, and/or revising the course.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>4.</td>
<td>The course was planned and implemented</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

(Revised March, 1990)
effectively.

COMMENTS: (Use back of page for additional space if needed)
2.B. EVALUATION OF SAHS/UTMB CLINICAL COORDINATOR BY OFF CAMPUS SITE PERSONNEL

For Faculty Member Use:

FACULTY COORDINATOR: ________________________________   SITE: ________________________
SEMESTER: ___________________________________   ACADEMIC YEAR: ____________

For Evaluator Use:

SOCIAL SECURITY NUMBER OF EVALUATOR: _____________________________
(Last six digits only of social security number; no names)
EVALUATOR IS: _____  Peer _____  Subordinate   _____  Supervisor
   _____  In School of Health Professions
   _____  Outside School of Health Professions

NOTE: This information will be used for decisions concerning the promotion and tenure of this faculty member.
(SA=Strongly Agree   A=Agree   N=Neutral   D=Disagree   SD=Strongly Disagree   NA/UE=Not Applicable/Unable to Evaluate)

I. RATE THE COORDINATOR ON THE BASIS OF THE FOLLOWING:

<p>| | | | | | |</p>
<table>
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</thead>
<tbody>
<tr>
<td>1. Coordinator gave notice of student assignments in a timely manner.</td>
<td>SA</td>
<td>A</td>
<td>N</td>
<td>D</td>
<td>SD</td>
</tr>
<tr>
<td>2. Coordinator provided current information on curriculum and objectives.</td>
<td>SA</td>
<td>A</td>
<td>N</td>
<td>D</td>
<td>SD</td>
</tr>
<tr>
<td>3. Coordinator collaborated with me when necessary regarding learning experiences for the student.</td>
<td>SA</td>
<td>A</td>
<td>N</td>
<td>D</td>
<td>SD</td>
</tr>
<tr>
<td>4. Coordinator was available upon request for consultation and assistance.</td>
<td>SA</td>
<td>A</td>
<td>N</td>
<td>D</td>
<td>SD</td>
</tr>
<tr>
<td>5. Coordinator provided instruments for</td>
<td>SA</td>
<td>A</td>
<td>N</td>
<td>D</td>
<td>SD</td>
</tr>
</tbody>
</table>

(Revised March, 1990)
evaluation of student performance.

6. Coordinator provided feedback to the clinical site after the student completed the rotation if requested or appropriate.

II. COMMENTS: (Use back of page for additional space if needed)

(Revised March, 1990)
SAMPLE

THE UNIVERSITY OF TEXAS SCHOOL OF HEALTH PROFESSIONS
THE UNIVERSITY OF TEXAS MEDICAL BRANCH AT GALVESTON

2.C.
INDIRECT TEACHING:
EVALUATION OF SELF-CONTAINED INSTRUCTIONAL PROJECT
(This work may be included in the scholarly activity category)

For Faculty Member Use:

FACULTY: __________________________________________

SEMESTER: ___________________________ ACADEMIC YEAR: ____________

TITLE OF MATERIAL: _______________________________________________________

Faculty member evaluated should fill in I and II.

I. Indicate intended use: II. Indicate type of material:

___ Remedial     ___ AV Unit
___ Review       ___ Printed Unit
___ Supplement   ___ Simulation Unit Exercise
___ Part of Course ___ Lab/Workshop Exercise
___ Self-assessment ___ Other

For Evaluator Use:

SOCIAL SECURITY NUMBER OF EVALUATOR: _____________________________
(Last six digits only of social security number; no names)

EVALUATOR IS: _____ Peer _____ Subordinate _____ Supervisor

_____ In School of Health Professions
_____ Outside School of Health Professions

NOTE: This information will be used for decisions concerning the promotion and tenure of this faculty member.

(SA=Strongly Agree  A=Agree  N=Neutral  D=Disagree  SD=Strongly Disagree
NA/UE=Not Applicable/Unable to Evaluate/Not Applicable)

III. RATE THE MATERIAL ON THE BASIS OF THE FOLLOWING:

SA  A  N  D  SD  NA/UE

(Revised March, 1990)
1. The goals/objectives are apparent in the introduction of this instructional unit.

2. The content is related to the goals/objectives.
2.C. Continued

3. The information acquired is proportional to the effort expended in utilizing the unit. 4 3 2 1 0 X
4. The unit fulfills goals/objectives. 4 3 2 1 0 X
5. The instructional format permits evaluative feedback. 4 3 2 1 0 X
6. The design of this instructional unit is effective. 4 3 2 1 0 X

IV. COMMENTS: (Use back of page for additional space if needed)

(Revised March, 1990)
For Faculty Member Use:

FACULTY: ___________________________ ACADEMIC YEAR: ____________________

COURSE PREFIX AND NO. _____________________ SEMESTER: ______________________

CLINICAL SITE (if appropriate): _______________________________________________

DATE: ______________________________________

Faculty member evaluated should fill in 1A.

I. Materials developed or selected for use by the Instructor (check all those that
were included in the evaluation):

(A) (B)*

____ Statement of course goals, objectives, or expected student outcomes.

____ Description of course.

____ Outline of course topics.

____ List of readings and other assignments.

____ Lab manuals, workbooks, problem sets.

____ Audio-visual materials, e.g., films, slides, transparencies, diagrams, graphs.

____ Textbook or set of required readings.

____ Study guide or handouts.

____ Examinations, quizzes, clinical skill checklists.

____ Lecturer outlines or lecture notes.

____ Case study.

____ Patient simulation.

____ Other instructional materials, please specify in Comments (Section III), if any,
by the instructor.

For Evaluator Use:

SOCIAL SECURITY NUMBER OF EVALUATOR: ________________________________

(Last six digits only of social security number; no names)

EVALUATOR IS: _______ Peer _______ Subordinate _______ Supervisor

_______ In School of Health Professions

(Revised March, 1990)
Evaluator please check column 1B.

* NOTE: If 1A and 1B do not match, send back to departmental chair before proceeding to Section II.0
Name: ____________________________________

2.D. Continued

NOTE: This information will be used for decisions concerning the promotion and tenure of this faculty member.

(SA=Strongly Agree, A=Agree, N=Neutral, D=Disagree, SD=Strongly Disagree, NA/UE=Not Applicable/Unable to Evaluate/Not Applicable)

II. Based upon an examination of course materials/procedures:

<table>
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<tr>
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<th>SA</th>
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<th>N</th>
<th>D</th>
<th>SD</th>
<th>NA/UE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. The goals and objectives are apparent in the course materials.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>2. The course material is logical, organized, and integrated.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>3. The course material reflects current concepts and practices.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>4. The course evaluation system is clearly explained.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>5. Evaluation material is consistent with materials covered in class and/or assignments.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
</tbody>
</table>

III. COMMENTS: (Use back of page for additional space if needed)

(Revised March, 1990)
SAMPLE
THE UNIVERSITY OF TEXAS SCHOOL OF HEALTH PROFESSIONS
THE UNIVERSITY OF TEXAS MEDICAL BRANCH AT GALVESTON

3.A.
EVALUATION OF SCHOLARLY WORKS
(Journal articles, books, monographs not peer reviewed or grant proposals not funded, etc.)
(Form 2.C may be used for evaluation of certain scholarly works related to indirect teaching)

For Faculty Member Use:

FACULTY MEMBER: ________________________   DEPARTMENT: __________________
SEMESTER: ______________________________   ACADEMIC YEAR: ________________

TITLE: ____________________________________________________________________________
(Indicate if journal article, book, draft, etc.)
Publication      ____  ______________
    (if applicable)     (Date)
or
Submission:     ____  ______________
    (Date)

CITATION: _____________________________________________________________

_____________________________________________________________

For Evaluator Use:

SOCIAL SECURITY NUMBER OF EVALUATOR: _____________________________
(Last six digits only of social security number; no names)

EVALUATOR IS: _____ Peer _____ Subordinate _____ Supervisor

_____ In School of Health Professions
_____ Outside School of Health Professions

NOTE: This information will be used for decisions concerning the promotion and tenure of this faculty member.
NAME: ________________________________

3.A. Continued

(SA=Strongly Agree  A=Agree  N=Neutral  D=Disagree  SD=Strongly Disagree
NA/UE=Not Applicable/Unable to Evaluate)

I. RATE THE WORK ON THE BASIS OF THE FOLLOWING:

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<th>D</th>
<th>SD</th>
<th>NA/UE</th>
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</thead>
<tbody>
<tr>
<td>1. The work reflects the current concepts and/or practices.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>2. The work has a clearly stated purpose.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>3. The research design reflects current research procedures in this field.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>4. The work is logical, organized, and integrated.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>5. The analysis of the data is appropriate to the research design.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>6. The conclusions are based on the data analyses.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>7. This work increases the body of knowledge or understanding in this profession/area of research.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
</tbody>
</table>

II. COMMENTS: (Use back of page for additional space if needed)

(Revised June, 1990)
3.B. EVALUATION OF GRANT/PROPOSAL/CONTRACT CONTRIBUTIONS

I. For Faculty Member Use:

FACULTY MEMBER: ____________________________ DEPARTMENT: ________________
SEMESTER: ____________________________ ACADEMIC YEAR: ________________
GRANT TITLE: __________________________________________________________
Submission Date: _______________________________________________________
Percent of Contribution in Writing/Development Grant __________ %
Percent of Contribution in Administering Grant __________ %

Please indicate in Section 3 those items for review

II. BRIEF DESCRIPTION OF YOUR RESPONSIBILITIES (one or two paragraphs):

For Evaluator Use:

SOCIAL SECURITY NUMBER OF EVALUATOR: ________________
(Last six digits only of social security number; no names)

EVALUATOR IS: _____ Principal Investigator
____ Department Chair
____ Collaborating Investigator
____ Other (Specify: __________________________)

____ In School of Health Professions
____ Outside School of Health Professions

NOTE: This information will be used for decisions concerning the promotion and tenure of this faculty member.

(Revised June, 1990)
### III. RATE THE FACULTY'S CONTRIBUTIONS TO THE GRANT ON THE ITEMS THAT HAVE BEEN CHECKED.

SA = Strongly Agree  A = Agree  N = Neutral  D = Disagree  SD = Strongly Disagree  NA/UE = Not Applicable/Unable to Evaluate

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>SA</th>
<th>A</th>
<th>N</th>
<th>D</th>
<th>SD</th>
<th>NA/UE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>The grant proposal is written in a logical, systematic, and integrated manner.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>2.</td>
<td>The hypothesis is based on a thorough review of the literature.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>3.</td>
<td>Objectives were clearly stated.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>4.</td>
<td>Tables, charts, graphs are informative and supportive of the proposal.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>5.</td>
<td>The research design reflects current methodologies.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>6.</td>
<td>The methods or research design section is applicable and facilitates data collection or activities to support objectives.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>7.</td>
<td>The budget section is appropriate and reasonable to implement the proposal.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>8.</td>
<td>The Evaluation or Analysis section is clear and provides methods and/or instruments to assess the proposal.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>9.</td>
<td>The grant has potential to bring extramural funding to department/school/university.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
</tbody>
</table>

### IV. THIS INDIVIDUAL:

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>SA</th>
<th>A</th>
<th>N</th>
<th>D</th>
<th>SD</th>
<th>NA/UE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Worked well with others.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>2.</td>
<td>Met deadlines.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>3.</td>
<td>Was dependable.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>4.</td>
<td>Overall, was effective in his/her role.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>5.</td>
<td>Attended Meetings.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>6.</td>
<td>Offered suggestions for solutions.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>7.</td>
<td>Followed through with commitments.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>8.</td>
<td>Brought credit to SHP/UTMB.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
</tbody>
</table>

### V. COMMENTS: Please include comments to substantiate/justify your ratings. (May use reverse side of this page for further comments.)

(Dated July, 1992)
Sample

THE UNIVERSITY OF TEXAS SCHOOL OF HEALTH PROFESSIONS
THE UNIVERSITY OF TEXAS MEDICAL BRANCH AT GALVESTON

4.A.
EVALUATION OF CLINICAL/PATIENT CARE

For Faculty Member Use:

NAME: ___________________________________________________

DATES OF SERVICE: _______________________________________

ACADEMIC YEAR: __________________

TYPE OF SERVICE PROVIDED:

_____ Consultation   _____ Patient Treatment
_____ Clinical Consultation   _____ Patient Education
_____ Patient Evaluation   _____ Other: ________________________________

BRIEF DESCRIPTION OF PROJECT AND YOUR RESPONSIBILITIES (one to two paragraphs):

For Evaluator Use:

SOCIAL SECURITY NUMBER OF EVALUATOR: _____________________________
(Last six digits only of social security number; no names)

EVALUATOR IS: _____ Peer   _____ Subordinate   _____ Supervisor

_____ In School of Health Professions
_____ Outside School of Health Professions

NOTE: This information will be used for decisions concerning the promotion and tenure of this faculty member.

(SA=Strongly Agree  A=Agree  N=Neutral  D=Disagree  SD=Strongly Disagree
NA/UE=Not Applicable/Unable to Evaluate)

I. THIS INDIVIDUAL:  

SA    A    N    D    SD    NA/UE

(Revised March, 1990)
1. Worked well with others.        4 3 2 1 0 X
2. Met deadlines.                  4 3 2 1 0 X
3. Was dependable.                 4 3 2 1 0 X
4. Overall, was effective in his/her role.  4 3 2 1 0 X

(Revised March, 1990)
<p>| | | | | | | |</p>
<table>
<thead>
<tr>
<th></th>
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<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>5.</td>
<td>Demonstrated current expertise.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>6.</td>
<td>This individual's contributions brought credit to the School Health Professions /UTMB.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

II. COMMENTS: Please add additional comments, particularly concerning pertinent evaluation information not included in this form.
4.B.
EVALUATION OF COMMUNITY SERVICE

For Faculty Member Use:

NAME: ___________________________________________________

DATES OF SERVICE: _______________________________________

ACADEMIC YEAR: __________________

TYPE OF SERVICE PROVIDED:

_____ Consultation
_____ Patient Education
_____ Other: ______________________________________________________________

BRIEF DESCRIPTION OF PROJECT AND YOUR RESPONSIBILITIES (one to two paragraphs):

For Evaluator Use:

SOCIAL SECURITY NUMBER OF EVALUATOR: _____________________________
(Last six digits only of social security number; no names)

EVALUATOR IS: _____ Peer _____ Subordinate _____ Supervisor

_____ In School of Health Professions
_____ Outside School of Health Professions

NOTE: This information will be used for decisions concerning the promotion and tenure of this faculty member.

(SA=Strongly Agree  A=Agree  N=Neutral  D=Disagree  SD=Strongly Disagree
NA/UE=Not Applicable/Unable to Evaluate)

I. THIS INDIVIDUAL:

1. Worked well with others.  
   
   |   |   |   |   |   |
   |SA|A|N|D|SD|NA/UE|
   |4|3|2|1|0|X|

(Revised March, 1990)
2. Met deadlines. 4 3 2 1 0 X
3. Was dependable. 4 3 2 1 0 X
4. Overall, was effective in his/her role. 4 3 2 1 0 X

(Revised March, 1990)
NAME: ____________________________________

4.B. Continued

5. Worked well with committees.  4 3 2 1 0 X
6. Attended meetings.  4 3 2 1 0 X
7. Offered suggestions for solutions.  4 3 2 1 0 X
8. Followed through with commitments.  4 3 2 1 0 X
9. This individual’s contributions brought credit to the School of Health Professions/UTMB.  4 3 2 1 0 X

II. PLEASE FILL OUT THE FOLLOWING IF THE INDIVIDUAL HELD ADMINISTRATIVE POSITIONS IN A COMMUNITY ORGANIZATION.

1. Made sound decisions.  4 3 2 1 0 X
2. Fostered teamwork and developed consensus.  4 3 2 1 0 X
3. Was an effective manager.  4 3 2 1 0 X
4. Identified and pursued important objectives.  4 3 2 1 0 X
5. Accomplished major objectives and completed tasks.  4 3 2 1 0 X

III. COMMENTS: Please add additional comments, particularly concerning pertinent evaluation information not included in this form.

(Revised March, 1990)
For Faculty Member Use:

NAME: ___________________________________________________

DATES OF SERVICE: _______________________________________

ACADEMIC YEAR: __________________

TYPE OF SERVICE PROVIDED:

_____ Consultation

_____ Committee Work

_____ Administration

_____ Other: ___________________________________________

BRIEF DESCRIPTION OF PROJECT AND YOUR RESPONSIBILITIES (one to two paragraphs):

For Evaluator Use:

SOCIAL SECURITY NUMBER OF EVALUATOR: _____________________________
(Last six digits only of social security number; no names)

EVALUATOR IS: _____ Peer _____ Subordinate   _____ Supervisor

_____ In School of Health Professions

_____ Outside School of Health Professions

NOTE: This information will be used for decisions concerning the promotion and tenure of this faculty member.

(SA=Strongly Agree  A=Agree  N=Neutral  D=Disagree  SD=Strongly Disagree
NA/UE=Not Applicable/Unable to Evaluate)

I. THIS INDIVIDUAL:

1. Worked well with others.  

   SA  A  N  D  SD  NA/UE
   4  3  2  1  0  X

2. Met deadlines.

   SA  A  N  D  SD  NA/UE
   4  3  2  1  0  X

(Revised March, 1990)
<table>
<thead>
<tr>
<th></th>
<th>Item</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>Was dependable.</td>
<td>4</td>
</tr>
<tr>
<td>4</td>
<td>Worked well with committees.</td>
<td>4</td>
</tr>
</tbody>
</table>

(Revised March, 1990)
NAME: ____________________________________________

4.C. Continued

<table>
<thead>
<tr>
<th></th>
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<th>A</th>
<th>N</th>
<th>D</th>
<th>SD</th>
<th>NA/UE</th>
</tr>
</thead>
<tbody>
<tr>
<td>5.</td>
<td>Attended meetings.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>6.</td>
<td>Offered suggestions for solutions.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>7.</td>
<td>Followed through with commitments.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>8.</td>
<td>Overall, was effective in his/her role.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>9.</td>
<td>This individual's contributions brought credit to the School of Health Professions/UTMB.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

II. PLEASE FILL OUT THE FOLLOWING IF THE INDIVIDUAL HELD ADMINISTRATIVE POSITIONS (E.G., OFFICER, COMMITTEE CHAIR, CONFERENCE COORDINATOR, ETC.) IN THE PROFESSIONAL ORGANIZATION.

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>A</th>
<th>N</th>
<th>D</th>
<th>SD</th>
<th>NA/UE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Made sound decisions.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>2.</td>
<td>Fostered teamwork and developed consensus.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>3.</td>
<td>Was an effective manager.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>4.</td>
<td>Identified and pursued important objectives.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>5.</td>
<td>Accomplished major objectives and tasks.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

III. COMMENTS: Please add additional comments, particularly concerning pertinent evaluation information not included in this form.

(Revised March, 1990)
For Faculty Member Use:

FACULTY MEMBER: ___________________________ DEPARTMENT: _______________________

FACULTY MEMBER IS: _____ Committee Member     _____ Committee Chairman

COMMITTEE: ___________________________ ACADEMIC YEAR: __________________

For Evaluator Use:

SOCIAL SECURITY NUMBER OF EVALUATOR: _____________________________
(Last six digits only of social security number; no names)

EVALUATOR IS: _____ Committee Member     _____ Committee Chairman

     _____ In School of Health Professions       _____ Outside School of Health Professions

NOTE: This information will be used for decisions concerning the promotion and tenure of this faculty member.

(SA=Strongly Agree A=Agree N=Neutral D=Disagree SD=Strongly Disagree NA/UE=Not Applicable/Unable to Evaluate)

I. RATE THE COMMITTEE MEMBER ON THE BASIS OF THE FOLLOWING:

<table>
<thead>
<tr>
<th></th>
<th>SA</th>
<th>A</th>
<th>N</th>
<th>D</th>
<th>SD</th>
<th>NA/UE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Member attends meetings and keeps current with committee.</td>
<td>4 3 2 1 0 X</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Member offers suggestions for solutions.</td>
<td>4 3 2 1 0 X</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Member follows through on committee work by appropriate actions and communication.</td>
<td>4 3 2 1 0 X</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Member attempts to meet deadlines.</td>
<td>4 3 2 1 0 X</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Member makes an overall positive to the progress of the committee.</td>
<td>4 3 2 1 0 X</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

II. COMMENTS: (Use back of page for additional space if needed)

(Revised March, 1990)
For Faculty Member Use:
NAME OF ADMINISTRATOR: ___________________________________________________________

TITLE: _______________________________________________________ ACADEMIC YEAR:

For Evaluator Use:

SOCIAL SECURITY NUMBER OF EVALUATOR: ______________________________
(Last six digits only of social security number; no names)

EVALUATOR IS: _____ Peer _____ Subordinate _____ Supervisor

_____ In School of Health Professions
_____ Outside School of Health Professions

NOTE: This information will be used for decisions concerning the promotion and tenure of this faculty member.

(SA=Strongly Agree  A=Agree  N=Neutral  D=Disagree  SD=Strongly Disagree
NA/UE=Not Applicable/ Unable to Evaluate)

I. RATE THE ADMINISTRATOR’S PERFORMANCE AS A MANAGER:

<table>
<thead>
<tr>
<th></th>
<th>SA</th>
<th>A</th>
<th>N</th>
<th>D</th>
<th>SD</th>
<th>NA/UE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Uses effective management procedures.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>2.</td>
<td>Delegates responsibility.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>3.</td>
<td>Attends to details.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>4.</td>
<td>Sees tasks to completion.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>5.</td>
<td>Encourages teamwork.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

II. RATE THE ADMINISTRATIVE STYLE:

<table>
<thead>
<tr>
<th></th>
<th>SA</th>
<th>A</th>
<th>N</th>
<th>D</th>
<th>SD</th>
<th>NA/UE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Deals with people fairly.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>2.</td>
<td>Deals with conflicts effectively.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>3.</td>
<td>Addresses situations and problems impartially.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>4.</td>
<td>Works effectively with faculty members.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

(Revised March, 1990)
5. Works effectively with other administrators in SHP.  

4 3 2 1 0 X

(Revised March, 1990)
NAME: __________________________________________

5.B. Continued

<table>
<thead>
<tr>
<th></th>
<th>SA</th>
<th>A</th>
<th>N</th>
<th>D</th>
<th>SD</th>
<th>NA/UE</th>
</tr>
</thead>
<tbody>
<tr>
<td>6. Works effectively with other administrators at UTMB.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>7. Involves faculty/staff in decision making.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>8. Encourages and/or promotes professional growth.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>9. Conducts meetings effectively.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
</tbody>
</table>

III. RATE THE ADMINISTRATOR'S PERFORMANCE AS A LEADER:

<table>
<thead>
<tr>
<th></th>
<th>SA</th>
<th>A</th>
<th>N</th>
<th>D</th>
<th>SD</th>
<th>NA/UE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Develops effective plans.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>2. Encourages professional growth of faculty.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>3. Keeps abreast of innovations in higher education.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>4. Responds to educational issues in health professions.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>5. Identifies and helps resolve school-wide problems.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
</tbody>
</table>

IV. OVERALL, THIS ADMINISTRATOR IS EFFECTIVE.

<table>
<thead>
<tr>
<th></th>
<th>SA</th>
<th>A</th>
<th>N</th>
<th>D</th>
<th>SD</th>
<th>NA/UE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
</tbody>
</table>

V. COMMENTS: (Use back of page for additional space if needed)

(Revised March, 1990)
For Faculty Member Use:

NAME OF ADMINISTRATOR: ______________________________________________

ADMINISTRATIVE RESPONSIBILITY OR PROJECT: ___________________________

TITLE: _______________________________  ACADEMIC YEAR: _____________

For Evaluator Use:

SOCIAL SECURITY NUMBER OF EVALUATOR: ______________________________
(Last six digits only of social security number; no names)

EVALUATOR IS: _____ Peer _____ Subordinate _____ Supervisor

_____ In School of Health Professions   _____ Outside School of Health Professions

NOTE: This information will be used for decisions concerning the promotion and tenure of this faculty member.

SA=Strongly Agree  A=Agree  N=Neutral  D=Disagree  SD=Strongly Disagree
NA/UE=Not Applicable/Unable to Evaluate)

I. RATE THE ADMINISTRATOR’S PERFORMANCE AS A LEADER AND MANAGER:

<table>
<thead>
<tr>
<th></th>
<th>SA</th>
<th>A</th>
<th>N</th>
<th>D</th>
<th>SD</th>
<th>NA/UE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Develops effective plans.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>2. Makes sound decisions.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>3. Uses effective management procedures.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>4. Attends to details.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>5. Sees tasks to completion.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
</tbody>
</table>

(Revised March, 1990)
Name: ____________________________________

5.C.  Continued

II.  RATE THE ADMINISTRATIVE STYLE:

<p>| | | | | | | |</p>
<table>
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<tr>
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<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Deals with people fairly.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>2. Deals with conflicts effectively.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>3. Works effectively with other faculty members.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>4. Works effectively with other administrators.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>5. Involves faculty/staff in decision making.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>6. Conducts meetings effectively.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
</tr>
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</table>

III.  OVERALL, THE FACULTY MEMBER IS AN EFFECTIVE ADMINISTRATOR.

<p>| | | | | | | |</p>
<table>
<thead>
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</thead>
<tbody>
<tr>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

IV.  COMMENTS:  (Use back of page for additional space if needed)

(Revised March, 1990)