**ATTACHMENT 8**

**Annual Review Forms for Faculty Member and Faculty Member’s Supervisor**

**UNIVERSITY OF NEW ENGLAND**

**Annual Faculty Member Performance Evaluation
for Calendar Year XXXX**

**Part A (Completed by Faculty Member undergoing evaluation)**

*Content of this form serves as the minimal protocol and can be supplemented by individual units. This form is to be completed by each faculty member, and submitted to and discussed with her/his supervisor. The UNE Faculty Handbook states that every member of the faculty will be reviewed annually as part of the Annual Review, Reappointment, Promotion, and Tenure process. All reporting of teaching, scholarship and service will align with departmental criteria established for reappointment, promotion, and tenure.*

When completed and signed by the candidate, supervisor, and dean, Faculty Member will add Parts A and B of this form to their RPT portfolio to be considered in multilevel RPT reviews.

Name of Faculty Member:

Pronouns:

Date of Hire:

Due Date of Faculty Member’s Portfolio for next Multilevel RPT Review:

Faculty Classification: (*Teaching*, *Research, Clinical or Tenure track)* (indicate one):

Rank: Date of appointment to current rank:

*(eg. Assistant, Associate, Professor,*

*as appropriate)*

Date tenured: *(if appropriate)*

Total Full-Time Equivalency (FTE; full-time regular, half-time regular, full-time visiting, half-time visiting or other (indicate one):

Supplemental UNE contract/Overload? YES/NO (indicate one): Please describe:

Annual contract length: (eg. 9 mo., 10 mo., 11 mo., 12 mo. (indicate one):

Percent Time (Effort), to total 100% (or equivalent workload quantification system):

 Teaching Time:

 Research/Scholarship Time:

 Service Time:

 Administration Time:

 Clinical:

**TEACHING**

1. What were your teaching assignments?

2. What were your teaching goals for the academic year under review (refer to last year's annual review or other discussions with your administrative supervisor)?

3. Student Evaluations: *Attach copies of the student evaluation report for each course to this document.*

4. What other activities demonstrate evidence of your teaching performance for the year under review (e.g. student advising, peer review, teaching innovations, awards, meetings, etc.)?

5. How would you rate your overall performance in the area of teaching for the year under review? (Using these categories: did not meet expectations, met expectations, exceeded expectations). Justify your response. (e.g., what are your strengths and weaknesses, what have you learned from student and peer evaluations, what improvements have you tried to incorporate into your courses, reflection on whether goals were met).

6. What are your teaching related goals for the upcoming year of review and beyond?

S**CHOLARLY ACTIVITY**

1. What were your scholarship-related goals for the year under review (refer to last year's annual review or other discussions with your administrative supervisor)?

2. What activities in the year under review demonstrate evidence of your scholarship (this may be presented in list form)? For each, indicate your level of involvement (examples: principal investigator, consultant, co-author, presenter). Include finalized work such as manuscripts published, presentations and grants funded, as well as work in progress such as grant applications, articles in preparation, etc.

* + 1. How would you rate your overall performance in the area of scholarship for the year under review? (Using these categories: did not meet expectations, met expectations, exceeded expectations). Justify your response (e.g., what are your strengths and weakness, reflection on whether goals were met).

4. What are your scholarship-related goals for the upcoming year of review and beyond?

**SERVICE**

1. What were your service goals for the year under review (refer to last year's annual review or other discussions with your administrative supervisor)?

2. What were your service activities in the year under review (this may be presented in list form)? For each, indicate your level of involvement (e.g., student advising, committee member, chair, consultant) and the frequency of activity (example: committee met quarterly), and particular achievements.

3. How would you rate your overall performance in the area of service for the year under review? (Using these categories: did not meet expectations, met expectations, exceeded expectations). Justify your response (e.g., what are your strengths and weaknesses, reflection on whether your goals were met).

4. What are your service-related goals for the upcoming year of review and beyond?

**OTHER**

1. Were you involved with any faculty development activities regarding teaching, scholarship, or service? If so, please list these here.

2. List other notable activities, awards, etc. with a brief description of each (1-3 sentences maximum).

3. Do you have any faculty development goals for the next academic year?

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Signature of Supervisor Date

* + - 1. Faculty Member:

I have received these comments and ratings from my immediate supervisor. I understand that I have the right to respond to these comments and ratings in writing within five (5) working days after receipt of this document.

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Signature of Faculty Member Date

1. Optional Comments by Faculty Member:

I would like to add these comments:

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Signature of Faculty Member Date

1. Signature of Dean Date
2. Optional Comments by Dean:

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Signature of Dean Date

**ATTACHMENT 8 (continued)**

**UNIVERSITY OF NEW ENGLAND**

**Annual Faculty Member Performance Evaluation
for Calendar Year XXXX**

**Part B (Completed by Faculty Member’s Supervisor)**

*Content of this form serves as the minimal protocol and can be supplemented by individual units. This form is to be completed by each faculty member’s supervisor and will be sent to the faculty member after the annual review and included in the faculty member’s RPT portfolio. The UNE Faculty Handbook states that every member of the faculty will be reviewed annually as part of the Annual Review, Reappointment, Promotion, and Tenure process. All reporting of teaching, scholarship and service will align with departmental criteria established for reappointment, promotion, and tenure.*

1. For teaching, scholarship, and service, separately, indicate:

* 1. your assessment of the faculty member's performance by explaining whether the faculty member does not meet, meets, or exceeds expectations set for the year under review. Discuss relevant circumstances that may explain any deviation from expected level of performance. Justify your rating using the evidence provided by the faculty member or other evidence that may be relevant.
	2. your assessment of the faculty member’s teaching, scholarship, and service-related goals for the upcoming year of review and beyond.
1. Considering the faculty member's performance in each area and other factors discussed, indicate and justify your single overall assessment (does not meet, meets, or exceeds).
2. For all faculty members eligible for promotion or tenure, comment about progress toward achieving the levels of performance that justify a recommendation for promotion to a more senior rank or award of tenure. Comments must address each area of professional responsibility.

Date of Faculty Member’s next Multilevel Review:

**SIGNATURES**

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1. Signature of Supervisor Date

2. Faculty Member:

I have received these comments and ratings from my immediate supervisor. I understand that I have the right to respond to these comments and ratings in writing within five (5) working days after receipt of this document.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

Signature of Faculty Member Date

3. Optional Comments by Faculty Member:

I would like to add these comments:

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Signature of Faculty Member Date

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Signature of Dean Date