

[Type here]

FORM E: Faculty Performance Review Summary

Faculty Member: _____

Dean: _____

Date: _____

Based on a comprehensive review of your performance conducted through the use of student evaluations, portfolio reviews, self-evaluations and/or peer evaluations, your faculty performance level is rated as:

_____ Meets expectations

_____ Needs improvement as outlined in the attached Faculty Improvement Plan (Form D).

Comments by the faculty member being evaluated:

_____	_____
Faculty Member's Signature	Date
_____	_____
Supervising Dean's Signature	Date
_____	_____
Supervising VP for Learning Signature if 2 nd review required.	Date