ACADEMIC EVALUATION SYSTEM
CONFERENCE REVIEW FORM

FOR THE SUPERVISOR (DEAN OR VICE PRESIDENT)

SUPERVISOR:

I have examined the annual report and

(    ) I agree with the evaluation

(    ) I disagree with the evaluation

(Comments by the Dean attached)

____________________________________  ____________________________
Supervisor                          Date
ACADEMIC EVALUATION SYSTEM

CHAIRPERSON/DEAN RATING OF FACULTY TEACHING EFFECTIVENESS

FORM FE-1

Faculty Member’s Name_____________________________ Date_________________

3 = Superior          2 = Good          1 = Needs Improvement

Rating x Weight = Score

\[\begin{array}{ccc}
1 & 2 & 3 \\
\end{array}\]

A. Preparation for Teaching (30%)

       \[
       \text{___________} \times 3 = \text{___________}
       \]

B. Classroom Presentation (30%)

       \[
       \text{___________} \times 3 = \text{___________}
       \]

Comment:

C. Evaluation of Student Achievement (10%)

       \[
       \text{___________} \times 3 = \text{___________}
       \]

Comment:

D. Response to Individual Student Needs (20%)

       \[
       \text{___________} \times 3 = \text{___________}
       \]

Comment:

E. Professional Conduct (10%)

Comment:

General Comments: \[
\text{Sum of Scores} \text{______} \div 30 \times 100 = \text{______}
\]
(Comments are not required)
Rating of Faculty Teaching Effectiveness:

3 SUPERIOR  
This rating should be used only in rare cases. It carries the implication that the individual’s performance in a particular area of activity reflects the highest degree of productivity and effectiveness.

2 GOOD  
This rating should always be interpreted in a favorable light. In a group, no matter what level, there is a middle range of performance. This rating implies that the individual has been productive and effective in the area that is being evaluated. It is expected that this rating will be the one which is most frequently applied.

3 NEEDS IMPROVEMENT  
This rating indicates that the performance in this area is not satisfactory, but that the shortcoming may be compensated by other strengths. Continued overall performance at this level may be grounds for dismissal.
ACADEMIC EVALUATION SYSTEM

STUDENT APPRAISAL OF FACULTY

FORM FE-2

If a Scan-Tron form has been provided, please mark your responses on the Scan-Tron and not on this sheet. Write any additional comments you might have on the back of the Scan-Tron sheet. Your help in improving instruction at Sul Ross is sincerely appreciated.

<p>| | | | | | |</p>
<table>
<thead>
<tr>
<th></th>
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<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>The instructor is well-organized</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>2.</td>
<td>The instructor is accessible to students</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>3.</td>
<td>The instructor is tolerant of students’ ideas</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>4.</td>
<td>The instructor demonstrates effective knowledge of the subject</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>5.</td>
<td>The instructor demonstrates effective use of teaching materials</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>6.</td>
<td>The instructor rarely is absent from or late to class</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>7.</td>
<td>The instructor’s assignments are clear</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>8.</td>
<td>The instructor provides adequate feedback regarding a student’s academic progress</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>9.</td>
<td>The instructor’s examinations reflect important points covered in the course</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>10.</td>
<td>The instructor does an excellent job of teaching this course</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
</tr>
</tbody>
</table>

(Additional items may be added by the instructor, the department, or the school)
ACADEMIC EVALUATION SYSTEM

ANNUAL REPORT ON TEACHING/JOB PERFORMANCE, SCHOLARLY/ARTISTIC ACTIVITIES, PROFESSIONAL GROWTH AND SERVICE

FORM FE-3

Name ___________________________ School ___________________________ Department ___________________________

_______________________________ ________________________________ ________________________________

Rank Years in Present Rank Years in Teaching at SRSU

Cite your accomplishments; annotate as necessary. Use outline form when possible. Add pages and attachments as necessary.

I.  TEACHING/JOB PERFORMANCE

II.  SCHOLARLY/ARTISTIC ACTIVITIES

III.  PROFESSIONAL GROWTH AND DEVELOPMENT

IV.  UNIVERSITY SERVICE
Teaching effectiveness ratings are to be taken directly from the Chairperson/Dean and student rating sheets. These ratings are weighted averages and should be recorded to the nearest tenth. The remaining activity areas should be evaluated and assigned a rating from 0 to 100.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Departmental Weights = Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>I. Teaching (must total at least 50%)</td>
<td></td>
</tr>
<tr>
<td>A. Chairperson Rating</td>
<td>(.30 - .50)</td>
</tr>
<tr>
<td>B. Student Rating</td>
<td>(.05 - .20)</td>
</tr>
<tr>
<td>II. Scholarly and Artistic Endeavor</td>
<td>(.10 - .30)</td>
</tr>
<tr>
<td>III. Professional Growth and Professional Activities</td>
<td>(.10 - .30)</td>
</tr>
<tr>
<td>IV. Non-teaching Activities Supportive of the University</td>
<td>(.10 - .30)</td>
</tr>
<tr>
<td>TOTAL</td>
<td>=</td>
</tr>
</tbody>
</table>

(At least the minimum weight of each category must be used and cumulative weights must total 100%)

Date of determination of weights ________________ Date of evaluation ________________

Chairman/Dean
( ) Approve ( ) Disapprove
Chairman/Dean
( ) Approve ( ) Disapprove

Faculty Member
( ) Approve ( ) Disapprove
Faculty Member
( ) Approve ( ) Disapprove

If either objects to any part of the above, documentation must be attached.

Staff member: I certify that this report has been discussed with me. I understand that my signature does not indicate agreement.

Signature: __________________________

Comments: __________________________
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