

EVALUATION OF FACULTY CANDIDATE by Selected Committee Member

College: _____, Austin Peay State University

College Committee on Retention and Tenure

Name of Faculty: _____

Years Granted Toward Tenure: _____

Committee Member, for the Committee: _____

This evaluation, written on behalf of the Committee, for the files of the Committee and for forwarding, by a member of the Committee voting with the majority, is as follows:

Committee Vote

- _____ (For)
- _____ (Against)
- _____ (Abstain)
- _____ (Absent)
- _____ (Non-Voting Dept. Rep)

Effectiveness in Academic Assignment (Area 1)

Research, Scholarship, and Creative Activities (Area 2)

Professional Contributions and Activities (Area 3)

Date of Committee Meeting: _____

Signature

Date Evaluation Submitted: _____

COLLEGE COMMITTEE VALIDATION: We certify that we have read the report. Although these statements reflect committee discussion, our signatures do not indicate agreement or disagreement with the above recommendation.

Signatures of committee members [Print your name clearly below your signature.]:

I certify that I have read the college committee's retention and tenure ~~evaluation and~~ recommendation form. My signature does not indicate agreement or disagreement with the statements made here.

Signature of Faculty Member

Date

Updated April 2010
Handbook Committee