

Faculty Annual Performance Evaluation¹
Includes Disclosure of Conflict⁹
For Review of Period: January through December (year) _____

Faculty Name: _____ Employee V#: _____

Rank: _____ Administrative Title (if applicable): _____

Unit(s): _____

| Responsibilities | PD % | Narrative | Met or Exceeded Expectations | |
|--|------|-----------|------------------------------|----|
| | | | Yes | No |
| Teaching and Advising ² | | | | |
| Scholarship and Creative Activities ³ | | | | |
| Outreach and Extension ⁴ | | | | |
| University Service and Leadership ⁵ | | | | |
| Overall faculty member met or exceeded the expectations defined in the position description | | | | |

Commentary/recommendations on progress toward tenure, promotion, and/or continued satisfactory performance.*

***Relationship to Promotion and Tenure Process.** The faculty annual performance evaluation is an administrative review. Annual evaluations are one component of the independent promotion and tenure process. See FSH 3520 and 3560 for details on the promotion and tenure process.

Unit Administrator Signature

Date

Unit Administrator Signature (joint appointments [if applicable])

Date

Faculty Signature ⁶

Date

Dean Signature

Date

- Interdisciplinary/Center Administrator Comments Attached** (if applicable). The unit administrator is responsible to solicit, discuss and consider evaluative comments from those interdisciplinary/center administrators listed in the faculty narrative. All solicited comments are to be attached to this form.⁷
- Faculty Comments Attached** (optional). The faculty member is allowed to include comments that respond to the administrator's evaluation.
- Dean's Comments Attached** (optional). If there is any significant difference in the commentary, recommendations, or evaluation overall between the department chair and college dean, the dean shall include a narrative stating the reasons for these differences. The form with attachments must be returned to the faculty member and an opportunity provided for the faculty member to respond.⁸

Disclosure of Conflicts⁹

- If you have a conflict to disclose then you also will need to complete Form FSH 6240A.
 - If there is any change in your circumstance that may give rise to potential conflicts or eliminate potential conflicts previously disclosed, then you will need to complete Form FSH 6240A within 30 days of the change.
 - Disclose outside employment for compensation of more than 20 hours/week by completing FORM 6240B
- I **DO NOT** have any conflicts of interest, conflicts of commitment or apparent conflicts, according to FSH 6240, to report.
- I **DO** have any conflicts of interest, conflicts of commitment or apparent conflicts, according to FSH 6240, to report.
 I have submitted FSH 6240A and a plan to manage each conflict or apparent conflict to my unit administrator.

Faculty Signature

Date

Unit Administrator Signature

Date

¹ Faculty Staff Handbook section 3320

² Faculty Staff Handbook section 1565 C-1

³ Faculty Staff Handbook section 1565 C-2

⁴ Faculty Staff Handbook section 1565 C-3

⁵ Faculty Staff Handbook section 1565 C-4, 1420E

⁶ "At the conclusion of the review process, each faculty member shall sign the evaluation form indicating that she/he has had the opportunity to read the evaluation report and to discuss it with the unit administrator." FSH 3320 A1 e

⁷ Faculty Staff Handbook section 3050 B-2, 3320 A-1 d, 3520 E-1, G-3, G-4c, and 3560 C,E-2d

⁸ If there is a disagreement, see Faculty Staff Handbook section 3320 A-1 i

⁹ Faculty Staff Handbook section 6240