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**FLETCHER TECHNICAL COMMUNITY COLLEGE  
ADJUNCT FACULTY EVALUATION AND PLANNING FORM**

Name \_\_\_\_\_ Period Covered from \_\_\_\_\_ to \_\_\_\_\_

Department \_\_\_\_\_ Discipline \_\_\_\_\_

Reason for Rating  Annual  First Semester Teaching  Other \_\_\_\_\_

Original Hire Date \_\_\_\_\_

**INSTRUCTIONS:**

**Criterion Comments** - In the space provided for criterion comments, please provide a brief narrative summary of the faculty member's activities during the period covered. These comments should justify the criterion rating as indicated. Utilize any goals and objectives that may have been set for this criterion in the previous evaluation period.

**Overall Evaluation Rating** - In the overall evaluation summary, provide a narrative statement that supports the overall evaluation rating for the faculty member for the period evaluated, as supported by the ratings for each Section.

**Planning Form** - Utilize the Planning Form to set goals and objectives for professional development for the next evaluation period.

**Performance Improvement Plan** – A Performance Improvement Plan is required for all faculty members with al evaluation ratings of Needs Improvement or Unsatisfactory in any category.

**Individual Rating** – The intent of this evaluation process is to rate the individual on his/her own performance based on objectives, goals, expectations and actual performance. It is not intended to be a ranking of one employee against another.

**Return pages 3 to 6, Planning Form and Performance Improvement Plan, if applicable, to the Division office.**

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## **Rating Categories and Definitions:**

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**5 – Outstanding – Performance is consistently well above the expected levels of competence in all requirements for the review criterion.** Performs work above expected levels for the position and may make suggestions for work improvement. Employee anticipates and responds quickly to changing situations, continually expanding knowledge and skills to address new challenges. Employee requires essentially no supervision of duties appropriate for the position, regularly going beyond what is expected for the review criterion.

A rating of Outstanding for the overall evaluation is used if the employee consistently performs well above all requirements of the position.

**4 – Exceeds Expectations – Performance is occasionally above the expected levels of competence for the review criterion.** Expectations are met in all areas, and in some areas are exceeded, but not on a consistent basis.

A rating of Exceeds Expectations for the overall evaluation is used if the employee has met all requirements of the job and has exceeded some, but not all, requirements of the position.

**3 – Meets Expectations – Performance consistently meets the expected level of competence for the review criterion.** Work of a satisfactory nature is performed on a consistent basis with normal supervision, meeting all job expectations of the review criterion.

A rating of Meets Expectations for the overall evaluation is used if the employee has consistently met all requirements of the position.

**2 – Needs Improvement – Performance does not consistently meet all requirements of the review criterion.** Overall performance is less than satisfactory for the review criterion. Where performance in some areas is satisfactory, improvement is needed in others.

A rating of Needs Improvement for the overall evaluation is used if the employee has met some requirements but there are areas where he/she needs improvement to meet requirements of the position, or where performance fluctuates between satisfactory and unsatisfactory. An overall rating of Needs Improvement requires that a Performance Improvement Plan be established for the employee with a follow-up performance evaluation required 90 days from the date of the Needs Improvement performance rating.

**1 – Unsatisfactory – Performance is consistently poor or inadequate in meeting most or all requirements of the review criterion.** Requires frequent, close supervision and/or the redoing of work. Few or no goals and objectives are met. Signifies need for immediate improvement.

A rating of Unsatisfactory for the overall evaluation indicates that the employee's performance does not meet the minimum requirements of the position. Overall performance must improve in order to retain the employee in his/her present position. A Performance Improvement Plan is required to be established for the employee with a follow-up performance evaluation required 90 days from the date of the Unsatisfactory performance rating. Human Resources must be consulted regarding the employee's future status with the institution.

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**A. Teaching and Direct Instructional Activities**

This performance section covers activities that include interaction with students related to instruction, preparing for instruction and evaluation of student performance. Consider the quality, quantity and effectiveness of these activities.

**Criteria for Evaluation and Comments**

**Criterion Rating**  
(Circle Rating)

	N/A	1	2	3	4	5
<p><b>1. Preparation of Course Materials</b> – Selects and secures appropriate texts, instructional aids, materials and supplies required for course presentation. Develops teaching plans and organizes class time in such a way that all required course materials are ready and available for course presentation and that course can be accomplished in the allotted time</p> <p><b>Comments:</b></p>						
<p><b>2. Course Presentation</b> – Provides individual and group instruction appropriate to the needs of the student(s) and the requirements of the activities being performed. Is present during class time. Assures clear understanding of materials presented. Utilizes and demonstrates required equipment, tools and other instructional aids. Provides sufficient resources for student(s) to perform assignments. Displays mastery of discipline.</p> <p><b>Comments:</b></p>						
<p><b>3. Student Performance Evaluation</b> – Encourages student participation, learning and individual initiative. Provides constructive feedback on tests and assignments. Provides fair and timely grading of student course work.</p> <p><b>Comments:</b></p>						

**Section B. Professional Development Activities:**

This performance section includes the faculty member’s responsibilities to the teaching and research fields as well as to the discipline. Professional development activities are those that enable faculty members to enhance individual teaching and research knowledge and/or capabilities and thus improve significantly the institution’s capabilities. Consider the quality, quantity and effectiveness of service in these activities.

**Criteria for Evaluation and Comments**

**Criterion Rating**

	N/A	1	2	3	4	5
<p>1. <b>Developing/Maintaining Professional Relationships</b> – Attends conferences, seminars, and workshops. Participates in professional organizations. May give professional presentations. Develops/maintains professional/collegial relationships. Communicates on professional matters (with media, government agencies, professional bodies, the system). Receives external recognition for professional achievement.</p> <p><b>Comments:</b></p>						
<p>2. <b>Continuing Education</b> – Pursues/acquires advanced degrees, certification, etc. Maintains continuing education associated with licensing and/or regulatory requirements.</p> <p><b>Comments:</b></p>						
<p>3. <b>Publishing/Writing Activities</b> – May publish/review professional books/articles. May write/review grant proposals  <b>OR</b>  <b>Research Activities</b> – Assures quality in grant proposals. Performs and oversees research that positively reflects on the institution. Participates in research review activities.</p> <p><b>Comments:</b></p>						

**OVERALL EVALUATION SUMMARY NARRATIVE:**

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**OVERALL EVALUATION RATING SUMMARY**

Section	Rating
<b>A. Teaching and Direct Instructional Activities</b>	
<b>B. Professional Development Activities</b>	

**ADDITIONAL COMMENTS (add separate sheet if necessary):**

**FACULTY MEMBER COMMENTS (add separate sheet if necessary):**

THIS APPRAISAL HAS BEEN DISCUSSED BY THE UNDERSIGNED

\_\_\_\_\_  
Supervisor (Sign & Print) \_\_\_\_\_ Date

\_\_\_\_\_  
Faculty Member\* (Sign & Print) \_\_\_\_\_ Date

\*This signature does not indicate agreement or disagreement but simply that the evaluation has been discussed.

Name _____		Rank _____		Period Covered from _____ to _____	
Department _____			Hire Date _____ Yrs at College _____		
Reason for Rating <input type="checkbox"/> Annual		<input type="checkbox"/> First Semester		<input type="checkbox"/> Other _____	

**ADJUCT PLANNING FORM** for use with Adjunct Faculty Evaluation

**Instructions:**

*The purpose of this part of the form is to describe the activities that the adjunct faculty member who wishes to continue teaching intends to pursue during the coming year. It is recommended that the description be specific so that at the end of the year there will be as little ambiguity as possible in judging whether each goal was achieved. It is recognized that some plans will be changed during the year and that not all goals will be achieved for a variety of reasons.*

**Briefly describe ongoing and/or planned Professional Development Activities:**

Faculty Member's Signature \_\_\_\_\_ Date \_\_\_\_\_

Faculty Member's Name (Print) \_\_\_\_\_

Supervisor's Signature \_\_\_\_\_ Date \_\_\_\_\_

## PERFORMANCE IMPROVEMENT PLAN

(Required for any evaluation ratings of Needs Improvement and Unsatisfactory 90 days following receipt of either overall rating.)

Employee: (Print) \_\_\_\_\_ Position/Rank \_\_\_\_\_

Evaluator: \_\_\_\_\_ Title: \_\_\_\_\_

***This following Performance Improvement Plan has been established for this employee due to receipt of an overall performance evaluation rating of***

***/ / Needs Improvement for the period covered from \_\_\_\_\_ to \_\_\_\_\_***

***/ / Unsatisfactory for the period covered from \_\_\_\_\_ to \_\_\_\_\_***

Identify the area(s) where performance improvement is needed. For each area identified establish goals and objectives that are required to be met. Be sure to assign a beginning date for each planned activity, a deadline for expected outcome completion date and a review date for area for performance improvement.

**Area for Performance Improvement:**

Planned activity and expected outcome:

Begin Date: \_\_\_\_\_ Outcome Completion Date: \_\_\_\_\_ Review Date \_\_\_\_\_

**Status of Planned Activity and Expected Outcome at Review Date:**

*Use as many pages as necessary for the Performance Improvement Plan.  
Indicate # of pages utilized \_\_\_\_\_.*

The undersigned understand that it is necessary at this time to focus on the indicated area(s) for performance improvement. It is noted that disciplinary action(s) may be taken at any point if performance does not indicate significant improvement.

\_\_\_\_\_  
Evaluator Signature      Begin Date      Employee Signature      Print Name      Review Date

\_\_\_\_\_  
Evaluator Signature      Review Date      Employee Signature      Print Name      Review Date