Appendix N

College Of Micronesia-FSM Instructional Faculty Evaluation Form

tructor's Name:	Division:			
luator's Name:	Period cover			
Annual Review	[] Step Increase [] Contract Renewal [] 6 Months F	Review [] Othe	
	pervisor's summative review section upus director, or other supervisor. Respond to applicable sections)	Satisfactory	Needs Improvement (include specifics in comments)	
1. SUBJECT MAT (shows good command a	TER CONTENT and knowledge of subject matter of the course)			
(shows responsibility for	student progress toward achieving stated learning outcomes, earning outcomes to the students, shows a commitment to effectiveness ing outcomes)			
	DN matters; methods of presentation, evidence of preparation; ectives; emphasis and summary of main points, meets class at scheduled			
4. RAPPORT (holding interest of stude participation)	ents; commanding their respect; fairness and impartiality; encourages			
5. TEACHING ME (use of teaching aids, ma	ETHODS aterials, and techniques; variety; balance; imagination)			
6. PRESENTATIO (delivery; projection; cla	N rity and precision; use of English)			
7. MANAGEMEN (attention to classroom r	Troutine; leadership ability; discipline and control)			
8. PROFESSIONA (adheres to the profession				
9. SENSITIVITY (exhibits sensitivity to st non-threatening learning	udents' and colleagues' personal culture, and gender differences, in a g environment)			
10. ASSISTANCE (assists students with ac	ETO STUDENTS cademic problems, participates in college advising system)			
11. PERSONAL (evidence of self-confide	ence; professional appearance)			
(recommends textbooks, recommendations to sup	ESPONSIBILITIES , performs assigned duties during registration, presents problems and pervisor, prepares course outlines, submits syllabi, maintains regular ficiency lists, submits grades, submits other required reports)			
II .	COLLEGE AND COMMUNITY s in commencement exercises, attends assigned committee meetings, y)			

This section is for faculty with chair responsibilities

Supervisor's summative review section (state campus director, or other supervisor. Respond to applicable sections)	Satisfactory	Needs Improvement (include specifics in comments)
C1. DUTY COMPREHENSION (shows good understanding of his or her duties as a supervisor)		
C2. PLANNING (shows ability to effectively prioritize, create time lines, and delegate tasks to their staff)		
C3. MENTORING (works with staff and/or faculty if appropriate to improve their job performance throughout the year)		
C4. LEADERSHIP (inspires and directs faculty member to achieve department and institution goals)		
C5. COMMUNICATION (keeps faculty/staff informed on items that affect their jobs)		
C6. FAIRNESS (treats staff/faculty equally and consistently over time)		
C7. CONFLICT RESOLUTION (proficient at handling conflict in their department)		
C8. EVALUATION (follows through on the performance evaluation process)		

EMPLOYEE'S COMMENTS:

Employee:	My signature below indicates that I have read and discussed this evaluation with my supervisor.					
	Employee's Signature		Date			
Primary Super	copy of this evaluation to th	ne employee, regul	ussed the evaluation with the carly and directly observed the luated, and read and understoon	performance of the		
	Supervisor's Signature	— Date	Co- Supervisor's Signatu	re Date		
Vice Presid	dent of Instructional Affairs (V My signature below indicate employee and approve the r	es that I concur wi	th the supervisory rating evaluge.	uation of the		
	VPIA's Signature		Date			
	HUMA	AN RESOURCES (for HRO use on				
Received By: _		Date:	·			
Salary Increme	nt Increase Effective Date:	Ste	p: Amount:	\$		
Contract Renew	val Effective Date:	NTE:	Step: Am	ount: \$		
Human Resou	rces Director:Signature		Date			