

PEER SUMMARY – EVALUATION OF FACULTY ACTIVITY

Annual Evaluation – Academic Year 2025-2026

Faculty/Member: _____

Rank/Title: _____

College/School: _____

Academic Department: _____

Please refer to the *Collective Bargaining Agreement: Article 23, Evaluation, Ref: 23.4 & 23.5.*

Name of Department Chair: _____

Date: _____

Forward electronic copy to the faculty member and to the Dean.

◆ TEACHING AND ADVISEMENT

Enter Number for Each:

Exceeds Rank Expectations _____

Meets Rank Expectations _____

Does Not Meet Rank Expectations _____

Enter Evaluative Comments (Text box will wrap text and expand as needed.)

◆ SCHOLARLY ACTIVITY

Enter Number for Each:

Exceeds Rank Expectations _____

Meets Rank Expectations _____

Does Not Meet Rank Expectations _____

Enter Evaluative Comments (Text box will wrap text and expand as needed.)

◆ SERVICE

Enter Number for Each:

Exceeds Rank Expectations _____

Meets Rank Expectations _____

Does Not Meet Rank Expectations _____

Enter Evaluative Comments (Text box will wrap text and expand as needed.)

◆ ADDITIONAL COMMENTS

Enter Evaluative Comments (Text box will wrap text and expand as needed.)