State University of New York

**College of Agriculture and Technology**

**Cobleskill, New York**

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| **ACADEMIC FACULTY SELF-EVALUATION FORM, PROFESSIONAL** **GROWTH PLAN & ACADEMIC EMPLOYMENT HISTORY** |
| ***TO BE COMPLETED BY FACULTY MEMBER*** |
| Name  |       | Date |       |
| Current Rank |       | Department |       |
| Evaluation Form for period |       | through |       |
| PURPOSE & INSTRUCTIONSThe purpose of the self-evaluation document shall be to promote professional growth and to help provide a basis for the review of performance of the teaching faculty and librarians. |
| Evaluation to be used for (Check all that apply): |
| [ ]  | 1. Effectiveness and self-improvement |  |
| [ ]  | 2. Promotion to |       |
| [ ]  | 3. Reappointment to a |       | year term |
| [ ]  | 4. Continuing appointment |  |

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| Criteria listed are meant to be illustrative not definitive (refer to Faculty Handbook for Criteria for Reappointment, Continuing Appointment, and Promotion). Faculty should seek to include as many of the evaluation criteria as are applicable and add lines for any other criteria to be considered. APPC recommends a minimum of ten (10) criteria spread across the three (3) categories, with no less than four (4) in the Teaching/Librarianship category and two (2) in each of the others.Each criterion chosen must be documented in writing and given a rating of HE, E, or ME. Use additional pages as necessary but do not exceed ten (10) pages of narrative for each category. Add an appendix of items referenced in your documentation and included in your folder. |
| DEFINITIONS FOR RATINGS (Only the following ratings should be used):**HE *Highly Effective* – Often exceeds the performance expectations.****E *Effective* – Generally meets performance expectations. Employee may exceed expectations or needs improvement in some areas. Performance is at the expected and usual level.****ME *Minimally Effective* – Does not always meet expectations. Immediate and substantive improvement in performance is required.** |

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| *Category #1a – Effectiveness in Teaching* |
| For ease of completion, Category #1 is split between Teaching and Librarianship. Please use the section that applies to you.  |
| **Rating** |  |  | **Rating** |  |
|   | 1. | Instructional proficiency in speech, organization of material, style of presentation, stimulation of critical thinking |  |   | 6. | Developing appropriate course content, curriculum, and/or teaching materials |
|   | 2. | In-depth knowledge of content area  |  |   | 7. | Creating/implementing appropriate instruments for student assessment |
|   | 3. | Current/proven pedagogical practices |  |   | 8. | Adapts/enhances course content based on feedback |
|   | 4. | Interacting with students outside of classroom setting |  |   | 9. |   |
|   | 5. | Engaging advisees regularly |  |   | 10. |   |
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| **DOCUMENTATION**:       |

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| *Category #1b – Effectiveness in Librarianship* |
| For ease of completion, Category #1 is split between Teaching and Librarianship. Please use the section that applies to you.  |
| **Rating** |  |  | **Rating** |  |
|   | 1. | In-depth knowledge of specialization  |  |   | 7. | Creates and maintains instruments for assessing effectiveness |
|   | 2. | Uses feedback to improve operations and/or performance |  |   | 8. | Promoting services |
|   | 3. | Managing area/s of responsibility (supervising/evaluating staff, policies, procedures, etc.) |  |   | 9. | Developing liaison relationships |
|   | 4. | Understanding of overall operations, commitment to goals/services |  |   | 10. | Developing programs |
|   | 5. | New initiatives |  |   | 11. |   |
|   | 6. | Integrating information literacy into the curriculum  |  |   | 12. |   |
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| **DOCUMENTATION**:       |

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| *Category #2 – Scholarship* |
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| **Rating** |  |  | **Rating** |  |
|   | 1. | Pursues advancement of knowledge base and performance levels |  |   | 5. | Produces articles in refereed or editor-reviewed publications |
|   | 2. | Develops marketable instructional materials or instruction material to enhance course presentation |  |   | 6. | Engages in successful grantsmanship |
|   | 3. | Creates peer-reviewed artistic works |  |   | 7. | Creates published (or selected unpublished) research, books, etc. |
|   | 4. | Invitations for professional presentations or performances |  |   | 8. |   |
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| *Category #3 – Service* |

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| **Rating** |  |  | **Rating** |  |
|   | 1. | Participates and/or leads in campus governance |  |   | 7. | Participates in community affairs |
|   | 2. | Participates and/or leads in University governance |  |   | 8. | Testifies as an expert witness |
|   | 3. | Supports student organizations |  |   | 9. | Serves on editorial boards |
|   | 4. | Serves internal/external and public and/or private organizations |  |   | 10. | Presents keynote addresses |
|   | 5. | Develops and implements local workshops |  |   | 11. |   |
|   | 6. | Serves in professional organizations |  |   | 12. |   |

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| *Professional Growth Plan* |
| This section is to be prepared by the faculty member and jointly reviewed/revised by the faculty member and Department Chair and/or Dean to serve as a guideline for the next evaluation. Short and long range plans should reflect faculty goals. A change may be initiated by the faculty member and amended in consultation with the Dean/Supervisor while the plan is in effect. |
| Name |       |
| Initial Appointment Date |       | Current Date |       |
|  |  |  |  |
| Short Range Professional Growth PlansDescribe in detail specific short range plans for professional growth during the coming academic year. Include separate sheet.Long Range Professional Growth PlansDescribe in detail specific long range plans for professional growth beyond the coming academic year. Include separate sheet. |
|  |  |       |
| Faculty Signature |  | Date |
| I reviewed this plan and [ ]  agree [ ]  disagree with the goals set forth. (See attached statement.) |
|  |  |       |
| Department Chair Signature |  | Date |
| I reviewed this plan and [ ]  agree [ ]  disagree with the goals set forth. (See attached statement.) |
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| Dean Signature |  | Date |

Copies of this completed form are to be retained by the faculty member, Department Chair, and Dean.

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| **Cobleskill Academic Employment History to be verified by Human Resources** |  |
| Date of Initial Term Appointment |       |
| Initial Academic Rank |       |

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| **Other Full Time Experience** |
| Name of Institution |       | Year(s) |       |
| Name of Institution |       | Year(s) |       |
| Name of Institution |       | Year(s) |       |

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| **Cobleskill Academic Reappointment Dates:**  |  |

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| **Interruptions in Cobleskill Service** |
| Type of Leave |       | Date |       |
| Type of Leave |       | Date |       |

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| Promotions |  |  |
| To Assistant Professor/Senior Assistant Librarian | Date |       |
| To Associate Professor/Associate Librarian | Date |       |
| To Professor/Librarian | Date |       |

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| --- | --- | --- | --- |
| Signature |  |  |       |
|  | Faculty Member |  | Date |
| Signature |  |  |       |
|  | Human Resources |  | Date |