**Evaluation and Signature Form for**

**Tenure Track Faculty and Non-Tenure Track Faculty for Calendar Year 20\_\_**

Name Rank/Level Department

Type of Appointment Years in Current Status Months Hire Date

1. Tenure Track/Non-Tenure Track Faculty Evaluation Committee: *Attach an evaluative statement.*

 Based on performance record, reappointment is: \_\_\_\_\_\_Recommended \_\_\_\_\_Not Recommended

 (Vote Count) (Vote Count)

 Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_

 Committee Chair Date

1. Department Chair: *Attach an evaluative statement with specific reference to performance and check appropriate spaces below.*

Probationary Faculty Reappointment recommended Reappointment not recommended

Temporary Faculty Reappointment recommended, contingent upon funding

 Reappointment not recommended

 Position terminates (date)

Unclassified Professionals Reviewed

Tenured Faculty Reviewed

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Teaching/Librarianship** | **Research/Creative Activity** | **Service** | **Overall** |
| **Meets expectations** |  |  |  |  |
| **Does not meet expectations** |  |  |  |  |
|  **N/A** |  |  |  |  |

Post-Tenure Review required? \_\_\_\_\_\_\_Yes \_\_\_\_\_\_\_ No (If yes, choose only one performance outcome below)

|  |  |
| --- | --- |
| **Post-Tenure Review - Attach 5 years of Faculty Activity Records**  | Check One Outcome  |
| **Meets expectations** |  |
| **Does not meet expectations 2 of past 4 yrs.**  |  |
| **Does not meet expectations 3 of past 5 yrs.**  |  |

 **Signature Form**

Faculty Member: (Check items that apply below.)

 I have discussed goals for the coming year with the chair, as attached to this evaluation.

 I have read this evaluation and had the chance to discuss it with the department chair.

 I have read this evaluation, had the opportunity to discuss it with the department chair, and I have

 ATTACHED A WRITTEN RESPONSE.

Signed

 Faculty member

 Date

Signed

 Chair Date

Dean: I concur with this evaluation. I have attached comments.

 Signed

 Dean Date

Provost: I concur with this evaluation. I have attached comments.

Signed

 Provost Date

WICHITA STATE UNIVERSITY

TENURE TRACK AND NON-TENURE TRACK FACULTY ACTIVITY RECORD for Calendar Year 20 .

*(Instructions for Completion are included in this document)*

Name Rank/Level

Department

I. TEACHING/LIBRARIANSHIP:

A. Courses taught (indicate courses taught for first time by an asterisk; list Independent Study and Blue Card Courses and identify by IS or BC).

|  |  |  |  |
| --- | --- | --- | --- |
| **Credit Hours** | **Course No. & Title** | **Term** | **Enrollment** |
|   |  |  |  |
|  |  |  |  |

B. Students advised: Bachelors \_\_\_\_\_; Masters \_\_\_\_\_; Doctoral\_\_\_\_\_; Other (explain) \_\_\_\_\_\_\_\_\_\_\_\_\_.

C. Degree Committees:

 Masters -Committee (member)\_\_\_\_\_ (chair)\_\_\_\_\_ (director)\_\_\_\_\_

 Thesis/report/terminal Project (member)\_\_\_\_\_ (chair)\_\_\_\_\_ (director)\_\_\_\_\_

 MFA -Thesis/Terminal Project (member)\_\_\_\_\_ (chair)\_\_\_\_\_ (director)\_\_\_\_\_

 Doctoral - Examination Committee (member)\_\_\_\_\_ (chair)\_\_\_\_\_

 Dissertation Committee (member)\_\_\_\_\_ (chair)\_\_\_\_\_

Support for students’ work through grants and/or publications:

Curriculum Improvement (new courses developed, significant course revisions, etc.) explain:

Faculty development activities (participation in workshops, conferences, being/having a mentor, etc.):

Special awards, honors, or other recognition of excellence in teaching:

For activities listed above in subsections A, through C, classify any (or all, as the case may be) TEACHING/LIBRARIANSHIP activities into UniScope classification of (add rows as needed):

|  |  |
| --- | --- |
| Topics (e.g. specific courses, advising, theses, etc.) | UniScope dimensions |
| Discovery | Integration | Application | Education |
|  |  |  |  |  |
|  |  |  |  |  |
| Comments, remarks, etc. |  |

II. RESEARCH/CREATIVE ACTIVITY:

A. Books, articles, compositions, etc., that were published and or accepted for publication. List significant performances, exhibitions, productions directed, etc. If multiple authors or creators, list in order of the magnitude of their contributions.

|  |  |  |  |
| --- | --- | --- | --- |
| **Title** | **Publisher / Place** | **Date** | **Refereed, Reviewed or Juried?** |
|   |  |  |  |
|  |  |  |  |

B. Research/creative project in progress (intended for dissemination/publication) and items submitted. (Use NA under publisher/place if work not yet submitted or deadline established):

|  |  |  |  |
| --- | --- | --- | --- |
| **Title** | **Publisher / Place** | **Date** | **Refereed, Reviewed or Juried?** |
|   |  |  |  |
|  |  |  |  |

C. Applications submitted for grants, contracts, fellowships and leaves (indicate by P under Funded if decision pending):

|  |  |  |  |
| --- | --- | --- | --- |
| **Title** | **Publisher / Place** | **Date** | **Funded Y/N; $ Amount** |
|   |  |  |  |
|  |  |  |  |

D. Consultancies, professional presentations/meetings. Paper/grant refereeing activity, contracted publication reviews, accreditation evaluator, adjudication etc.:

|  |  |  |  |
| --- | --- | --- | --- |
| **Title** | **Role** | **Date** | **Remuneration Y/N** |
|   |  |  |  |
|  |  |  |  |

E. Professional awards, honors, editorships (list teaching awards/honors in Section I):

|  |  |  |  |
| --- | --- | --- | --- |
| **Title** | **Role** | **Date** | **Remuneration Y/N** |
|   |  |  |  |
|  |  |  |  |

For activities listed above in subsections A through E, classify any (or all, as the case may be) RESEARCH/CREATIVE ACTIVITIES into UniScope classification of (add rows as needed):

|  |  |
| --- | --- |
| Topics (e.g. details of books, projects, grants, consultancies, presentations, etc.) | UniScope dimensions |
| Discovery | Integration | Application | Education |
|  |  |  |  |  |
|  |  |  |  |  |
| Comments, remarks, etc. |  |

III. SERVICE:

A. Administrative (including graduate assistant supervision, etc.), committee activity, or other service within the University (organize by levels and designate; D for School/Dept.; C for College; U for University).

|  |  |  |  |
| --- | --- | --- | --- |
| **Committee of Activity** | **Role** | **Date or *ongoing*** | **Rel time or Remuneration Y/N** |
|   |  |  |  |
|  |  |  |  |

B. Community service, non-credit course taught, and special services to WSU:

|  |  |  |  |
| --- | --- | --- | --- |
| **Committee of Activity** | **Role** | **Date or *ongoing*** | **Rel time or Remuneration Y/N** |
|   |  |  |  |
|  |  |  |  |

C. Service to professional organizations, etc., if not cited in Category II:

|  |  |  |  |
| --- | --- | --- | --- |
| **Committee of Activity** | **Role** | **Date or *ongoing*** | **Rel time or Remuneration Y/N** |
|   |  |  |  |
|  |  |  |  |

For activities listed above in subsections A through C, classify any (or all, as the case may be) SERVICE activities into UniScope classification of (add rows as needed):

|  |  |
| --- | --- |
| Topics (e.g. details of administrative, committee, community service, professional service activities, etc.) | UniScope dimensions |
| Discovery | Integration | Application | Education |
|  |  |  |  |  |
|  |  |  |  |  |
| Comments, remarks, etc. |  |

 IV. POSITIVE RISK-TAKING [Optional]:

If some of the activities noted above in teaching/librarianship, research/creative activity, and service involved some element of risk-taking, acting experimentally outside the normal parameters, provide a brief narrative description of the risk(s) taken.

**Describe the experimentation, outcome, and learning that took place. Explain how this activity involved risk-taking and what parties were affected by the activity. Include the beginning and ending dates of the experimentation and if there was compensation for the activity.**

1. Developing unique applied learning or research experiences for students:

B. Pioneering interdisciplinary curricula with others.

C. Capitalizing on relevant trends that increase quality educational opportunities in a distinctive way:

D. Accelerating the discovery, creation, or transfer of new knowledge via inventions, innovations, or technologies that are market driven:

E. Empowering students to create a campus culture and experience that meets their changing needs:

F. Enhancing learning via the creation of a campus that reflects – in staff, faculty and students – the evolving diversity of society:

**Faculty Activity Record Instructions**

*This format for the Faculty Activity Record has been provided to allow for adjustment of the form for the space needed in each category. Please refer to and complete all items listed on the outline and GIVE ONE COPY TO YOUR CHAIR.*

INSTRUCTIONS FOR COMPLETING THE FACULTY ACTIVITY RECORD

GENERAL INFORMATION

The Faculty Activity record is prepared by the faculty member and submitted for use with the Faculty Evaluation Form at the department level.

The Faculty Activity Record is an annual update of professional activity during a single calendar year. Those employed at WSU for less than a calendar year should indicate the months employed at the top of the first page. Please enter complete name, official rank/title, and department at the top of the first page.

I. TEACHING/LIBRARIANSHIP:

List sequentially all course taught (including independent study [IS] and blue card [BC]) during the Spring, Summer and Fall terms of the calendar year, and indicate credit hours, course number and title, term and official 20th day enrollment. Denote by an asterisk at left if the course was taught for the first time. Librarians should use this space to list activities and accomplishments.

Identify the number of students advised by level.

Identify the number of graduate committees by function: member, chair, or director.

List students with whom you have worked on grants and/or publications and identify the projects.

Outline contributions to curriculum improvement (new course development, course restructuring, internationalizing the curriculum, integrating computers in course content or teaching methodology etc.).

List any involvement as a teacher or participant in WSU or off-campus faculty development activities.

List special recognitions.

Provide details of activities aligned with UniScope classifications and add comments/remarks as applicable.

II. RESEARCH/CREATIVE ACTIVITY [Optional for Non-Tenure Track faculty]:

Indicate whether you are the sole author or, in the case of collaborations, list the authors in order of the importance of their contributions. List all works published or accepted for publication during the calendar year showing full title, publisher/publication, and date. Clearly indicate expected date for unpublished materials as well as whether refereed or not. Include only those publications/performances, which are considered scholarly contributions to your disciplinary area.

For creative activities (art exhibitions, musical performances, theatre productions). Indicate whether you are the sole creator, or in the case of collaborations, list the creators and the role each played, the place and date exhibited/performed, and indicate whether the activity was refereed/juried and your rating.

Indicate work in progress, including items submitted, If still in the research/preparation stage, write NA under the publisher/place to indicate work has not been submitted.

Indicate applications for grants, contracts, fellowships and leaves by title, sponsoring agency/organization, and date submitted. The amount under $ funded should be the amount awarded. If the application was not funded, enter NF under $ Funded.

Indicate consulting, professional presentations, meetings attended, and refereeing of papers/grants or creative activities during the year. Describe the activity, your role, the date the activity occurred and the amount, if any, or remuneration received for services.

List awards, memberships in professional associations and editorships of journals; include election to a leadership role in regional or national professional organizations.

Provide details of activities aligned with UniScope classifications and add comments/remarks as applicable.

III. SERVICE:

List all university administrative and committee assignments, noting department (D), college (C) or university (U) level. If released time and/or compensation was provided, indicate the number of released hours and/or amount of stipend associated with the activity.

List service or community activities or special services to WSU (e.g. Assistance at alumni meetings or student recruiting.).

Provide details of activities aligned with Unicode classifications and add comments/remarks as applicable.

*Remember: the Faculty Activity Record is an account of your professional academic discipline-related activity during the calendar year. The Record should include only those activities related to your faculty assignment (for tenured faculty), to your performance in those areas reviewed for the award of tenure and promotion (for probationary faculty), or to fulfillment of role description/assignment (for unclassified professional and temporary faculty).*

IV. POSTIVE RISK-TAKING [Optional]:

If some of the activities noted above in teaching/librarianship, research/creative activity, and service involved some element of risk-taking, acting experimentally outside the normal parameters, provide a brief narrative description of the risk(s) taken. Describe the experimentation, outcome, and learning that took place. Explain how this activity involved risk-taking and what parties were affected by the activity. Include the beginning and ending dates of the experimentation and if there was compensation for the activity.

V. POST-TENURE REVIEW:

Post-tenure reviews of all tenured faculty members shall be conducted at five-year intervals, with the first review to take place five years after tenure is awarded. The post-tenure review shall be based upon an evaluation of the materials submitted by the faculty member for the previous five annual Faculty Performance Evaluations. See *Policies and Procedures* 5.14.