REAPPOINTMENT APPRAISAL AND RECOMMENDATION FORM - CONTRACT RENEWAL FOR CONTRACT FACULTY

Faculty Member's Information
Name:
College: Department:
Current rank:
Year & Semester Appointed:
Leaves of Absence (list semester(s), if applicable):
Years in present faculty rank, as of the end of the current academic year:
At USI: Elsewhere: Total:
Each evaluator (e.g., Department or Program Chair, review committee, Dean) prepares a memo summarizing the appraisal of the faculty member's progress in the relevant evaluation areas (e.g., teaching, scholarship and professional activity, service) and listed in appropriate College/unit guidelines, including specific achievements, strengths, and weaknesses in the applicable evaluation areas. This form, the accompanying appraisal memos, and supporting materials (as applicable) shall be forwarded to the appropriate administrator.
Evaluation by the College Dean Recommendation: Reappointment Conditional Reappointment Non-Reappointment
Name and Signature of Dean:
Name and Signature of Deam.
Date
Faculty Acknowledgement:
I have reviewed the above appraisal and recommendation.
Faculty Member's Signature: Date
Evaluation by the Provost Reappointment Conditional Reappointment Non-Reappointment
Dr. Shelly Blunt, Interim Provost

Revision date: 6.20.2023