

Peer Review

(This page to be completed by faculty member utilizing Peer Review.)

Faculty Member: _____

Name of individual doing peer review: _____

Qualifications of person to do this peer review: _____

Your rationale for using this person's expertise: _____

NOTE: You must notify your supervisor by March 10 if you intend to use this Peer Review as part of your evaluation. The completed form should be submitted along with your End of Year Report by March 15.

Peer Review Form

Faculty Member: _____

Your name: _____

Your occupation: _____

Briefly list your qualifications to do this review and your relationship with the person you are reviewing:

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Directions: Answer the following questions to the best of your knowledge. Space is provided for comments as deemed appropriate.

1. Does this faculty member show a genuine interest in his/her class?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	Comments:
2. Does this faculty member exhibit an ability to communicate with students?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	Comments:
3. Does this faculty member participate in non-teaching duties and activities?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	Comments:
4. Does this faculty member communicate with and cooperate with colleagues?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	Comments:
5. Does this faculty member have a positive attitude toward education and TNCC?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	Comments:

6. Please comment on particular strengths you observe in this faculty member?	Comments:
7. Please comment on particular weaknesses you observe in this faculty member?	Comments:
8. Overall, how would you rate this faculty member?	Excellent <input type="checkbox"/> Very Good <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Unsatisfactory <input type="checkbox"/>

Peer Evaluator Signature

Date

Faculty Member Signature

Date