

Full-Time Part-Time

Time Period: Spring 2016 and Fall 2016

Full Name: _____

Department/School: _____

College: _____

This ASA form must be completed by each temporary faculty member and submitted to their Department/School by January 27, 2017. A copy will be attached to the Annual Evaluation and will be placed in the faculty member's Personnel Action File to provide a cumulative record of achievements. ****Pursuant to Article 15.12 of the Collective Bargaining Agreement, faculty members are responsible for submitting evaluation materials required by campus policy. Failure to submit required material will be taken into consideration as part of the evaluation.***

NOTE: Documentation should not be attached unless it is requested by the Department/School or Dean.

1. Teaching Effectiveness

Although much of the evidence concerning teaching effectiveness will be obtained through student and peer evaluations or examinations of course outlines, tests, or grades, additional information regarding teaching practices and regarding activities intended to maintain or improve teaching effectiveness should be described.

2. Service to Students and/or the University:

3. Additional Achievements, Qualifications, and/or Contributions (optional)

Please provide any other achievements you would like to be considered:

I affirm that the information contained in this 2016 Annual Summary of Achievements is true and accurate to the best of my knowledge.

Name (Please Print)

Signature

Date