

Librarian Faculty Evaluation Performance Review Form

Name _____ B# _____

Supervising Administrator _____ Campus _____
(Provost level or higher)

Pre-Evaluation Conference Date _____ Class Observation Date _____

Hire Date _____ Tenured ___Yes ___No Performance Review Date _____

I. Library Faculty Self-Evaluation:

The faculty member is responsible for completing and submitting this section prior to the faculty librarian's scheduled performance review.

A. Maintained required work hours scheduled by the library faculty and supervising administrator.

A. Fall Term ___Yes ___No ___N/A

B. Spring Term ___Yes ___No ___N/A

C. Summer Term ___Yes ___No ___N/A

B. Attended required scheduled in-service activities except when on approved leave.

A. Fall Term ___Yes ___No ___N/A

B. Spring Term ___Yes ___No ___N/A

C. Participated in collection development and maintenance.

A. Fall Term ___Yes ___No ___N/A

B. Spring Term ___Yes ___No ___N/A

C. Summer Term ___Yes ___No ___N/A

D. Attended all cluster meetings unless on approved leave or fulfilling a previously scheduled college or academic-related commitment.

A. Fall Term ___Yes ___No ___N/A

B. Spring Term ___Yes ___No ___N/A

E. Attended all required scheduled college-wide, campus-wide and area meetings unless on approved leave.

A. Fall Term ___Yes ___No ___N/A

B. Spring Term ___Yes ___No ___N/A

C. Summer Term ___Yes ___No ___N/A

F. Provided library services to students in a professional manner.

A. Fall Term ___Yes ___No ___N/A

B. Spring Term ___Yes ___No ___N/A

C. Summer Term ___Yes ___No ___N/A

G. Provided accommodation plans for disabled students as approved by the Office for Students with Disabilities (OSD).

A. Fall Term ___Yes ___No ___N/A

B. Spring Term ___Yes ___No ___N/A

C. Summer Term ___ Yes ___ No ___ N/A

H. Attended graduation ceremony unless excused or on approved leave.

A. Fall Term ___ Yes ___ No ___ N/A

B. Spring Term ___ Yes ___ No ___ N/A

The follow questions should be completed only if the library faculty is teaching a course or part of a course

I. Distributed or posted the syllabus to students by the end of the first week of class and submitted a copy to the supervising administer.

A. Fall Term ___ Yes ___ No ___ N/A

B. Spring Term ___ Yes ___ No ___ N/A

C. Summer ___ Yes ___ No ___ N/A

J. Attended all scheduled classes except when on approved leave.

A. Fall Term ___ Yes ___ No ___ N/A

B. Spring Term ___ Yes ___ No ___ N/A

C. Summer ___ Yes ___ No ___ N/A

K. Participated in developing, revising and implementing a course

A. Fall Term ___ Yes ___ No ___ N/A

B. Spring Term ___ Yes ___ No ___ N/A

C. Summer ___ Yes ___ No ___ N/A

By completing this section, I affirm that I have met the primary and other responsibilities as contained in the faculty Collective Bargaining Agreement.

Faculty signature

Print name

Date

II. Library Faculty Development and Self-Assessment

The library faculty member is responsible for completing this section prior to the scheduled Librarian performance review or by April 1st, whichever comes first. This section must be completed using the Faculty Professional Development System via Banner. Submit documentation for each entry (meeting minutes, proof of attendance/CEUs, programs, etc.). Record number of points accrued per section below. Faculty are required to have a minimum of 3 points in Section II.

A. Points for campus, college, cluster or other EFSC-related committees _____

B. Points for community or professional projects _____

C. Points for professional organizations, publications, or presentations of scholarly or professional work _____

D. Points for attendance at professional meetings, continuing education credits, graduate level courses _____

- E. Points for instructional development such as enhanced teaching strategies, new course development, WIDS conversions, curriculum revisions, etc. _____
- F. Other contributions that may not be included in the system and have been approved by your supervising administrator: _____

Reflection: How have the experiences above enhanced your teaching and/or personal and professional growth since the last review?

III. Student enhancement

A. What was your most positive teaching/student support experience since your last review?

B. Discuss your perception of student success in your classes/area of instruction since your last review.

c. What did you do to ensure student success?

1. I used the Early Alert system.	Yes	No	NA
2. I recommended academic support resources such as the Learning Lab, Library Writing Center or another college writing service.	Yes	No	NA
3. I participated in the Core Scholar Program.	Yes	No	NA
4. I offered group tutoring or other remediation.	Yes	No	NA
5. I made other changes based on student feedback	Yes	No	NA

Comments: _____

d. Comment on your overall performance in the area of ensuring student success in your area of instruction.

e. What limitations to increasing student success have you encountered in your area of instructions?

IV. The following section is to be completed by the Supervising Administrator (Provost level or higher) prior to the post-observation meeting:

a. The faculty member posted and maintained scheduled hours as required for maintenance of library coverage during posted hours within limitations specified by the contract and as approved by the supervising administrator ___ Yes ___ No ___ N/A

b. The faculty member maintained required credentials for their subject matter. ___ Yes ___ No ___ N/A

- c. The faculty member attended all discipline and curriculum cluster meetings that did not interfere with her or his teaching schedules or approved leave times. ___ Yes ___ No ___ N/A
- d. The faculty member participated in committees when appointed and attended all meetings that did not interfere with her or his teaching schedules or approved leave times. ___ Yes ___ No ___ N/A
- e. The faculty member attended all in-service days that did not interfere with approved leave times. ___ Yes ___ No ___ N/A
- f. The faculty member participated in revision of collections and implementation of new information technology materials. ___ Yes ___ No ___ N/A

Comments: _____

V. List the Goals from the Previous Evaluation and to what degree each was achieved.

VI. Goals for the Upcoming Academic Year (to be filled out jointly by the Supervising Administrator (Provost level or higher) and the faculty member):

A. Discipline/Program-related goals for the next cycle:

- 1. Do you plan to join a college committee? Yes No
 If so, which committee? _____
- 2. Do you plan to implement a new programmatic assessment? Yes No
 If so, describe _____
- 3. Do you plan to revise or write new curriculum for your program or discipline? Yes No
 Please comment on implementation of curriculum revision in III. F.
- 4. Other: _____

B. Professional Development goals for the next cycle:

- | | | |
|---|-----|----|
| 1. Do you plan to complete a graduate level course? | Yes | No |
| a. In your discipline? | Yes | No |
| Comment: _____ | | |
| b. Outside your discipline? | Yes | No |
| Comment: _____ | | |
| 2. Do you plan to publish an article, book, or juried work? | Yes | No |
| Comment: _____ | | |
| 3. Other: _____ | | |
| _____ | | |

C. Community Service goals for the next cycle:

- | | | |
|---|-----|----|
| 1. Do you plan to serve on or establish a community advisory board? | Yes | No |
| Comment: _____ | | |
| 2. Do you plan to participate in >20 hours of community service? | Yes | No |
| Comment: _____ | | |
| 3. Other: _____ | | |
| _____ | | |

D. Student Success goals for the next cycle:

- | | | |
|--|-----|----|
| 1. Do you plan to implement new technologies. | Yes | No |
| Comment: _____ | | |
| 2. Do you plan to revise or develop curriculum to improve student success. | Yes | No |
| Comment: _____ | | |
| 3. Do you plan to implement specific learning assessments. | Yes | No |
| Comment: _____ | | |
| 4. Do you plan to mentor/advise adjunct faculty in my area of expertise. | Yes | No |
| Comment: _____ | | |
| 5. Are there other strategies you plan to use to improve student success? | Yes | No |
| Comment: _____ | | |
| _____ | | |
| _____ | | |
| _____ | | |

VII. Formal Classroom Observation (to be conducted by the supervising Provost or designee)

The faculty member:

- | | | | |
|---|---------|--------|---------|
| A. Communicated in a manner to encourage student engagement and interest. | ___ Yes | ___ No | ___ N/A |
| B. Accommodated students with disabilities when provide with notice by the student and the OSD. | ___ Yes | ___ No | ___ N/A |
| C. Demonstrated knowledge of the library facilities. | ___ Yes | ___ No | ___ N/A |
| D. Demonstrated knowledge of information science. | ___ Yes | ___ No | ___ N/A |

- E. Demonstrated knowledge of library technologies immediately available to students. Yes No N/A
- F. Used germane and clearly understood handouts, multimedia presentations or other materials. Yes No N/A
- G. Answered student's questions clearly. Yes No N/A
- H. Made the orientation or activity relevant to the student's needs. Yes No N/A
- I. Communicated clearly. Yes No N/A
- J. Was well prepared and organized. Yes No N/A
- K. Treated students with respect. Yes No N/A

Comments: _____

VIII. Based upon this evaluation, I consider the faculty member's overall performance to be:

- Outstanding, recommend for continuation
- Satisfactory, recommend for continuation
- Acceptable, but some improvement needed (complete section below)
- Unsatisfactory (complete section below)

Feedback from Supervising Administrator: _____

IX. Plan of Action (if needed):

- A. Time-frame is set for determining improvement. _____

B. Outcomes and recommendations if no improvement is documented based on the established action plan within the allotted time period. _____

Supervisor's Signature

Library Faculty Signature

Supervisor's Printed Name

Faculty Printed Name

Date

Date