(1802-2020) SPS Evaluation of Faculty

**NOTE: You will be signed out of Faculty180 after 60 minutes of inactivity for security reasons. Please save your work accordingly.**It is recommended to prepare your evaluation narratives in a [Word document version of the form](https://www.boisestate.edu/academics-deptchairs/faculty180/faculty-resources/annual-evaluation-forms/) before entering it into this evaluation form. If you will be away from your desk for an extended time, place a character/number in any/all required fields and save your work so as not to lose it. **New as of CY 2020**: Past calendar year's semester workloads and current spring workload data are now entered by the faculty member in the faculty member's **Workload** section under "Activities."

**ALSO NOTE:** **Do not** hit the 'Evaluate' button while you have an evaluation form opened, even if it's minimized. This will reload the form, and you will lose any unsaved progress.

**Instructions**

Department chairs/supervisors, use this evaluation form to complete the following:

* Confirm past CY FTE
* Confirm past CY workload figures entered by faculty member (shown in the annual activity summary)
* Merit ratings and narratives for past CY

AEvaluation Period

|  |  |
| --- | --- |
| **Past Calendar Year\*** |  |

BFaculty FTE

Please confirm faculty member's FTE for the past calendar year.

|  |  |
| --- | --- |
| **Faculty FTE (past calendar year)\*** |  |

CPast Calendar Year's Workload Confirmation

In the field below, check the box to confirm that the past calendar year's workload percentages in the \*Workload\* section of the faculty member's account are reviewed, accurate and approved. The workload records for the previous Spring and Fall semesters (and preliminary for current Spring term) can be found in that section.

|  |  |
| --- | --- |
| **Supervisor Past Calendar Year Workload Approved?\*** | Pending  Yes |

DRatings and Narratives of Faculty for the Past Calendar Year

|  |  |
| --- | --- |
| **Teaching Narrative** | 11pt    0 WORDS |
| **Teaching Rating\*** |  |
| **Scholarly Activities Narrative** | 11pt    0 WORDS |
| **Scholarly Activities Rating\*** |  |
| **Service Narrative** | 11pt    0 WORDS |
| **Service Rating\*** |  |
| **Administration Narrative** | 11pt    0 WORDS |
| **Administration Rating** |  |

EFaculty - Supervisor Performance Evaluation Meeting

|  |  |
| --- | --- |
| **Has supervisor met with faculty member to discuss this Performance Evaluation?\*** |  |
| **If meeting occurred, please enter date of meeting** |  |

FSupervisor E-signature

Please enter the date when you complete this form. You may make further changes until you SUBMIT this from the Evaluation Menu.

|  |  |
| --- | --- |
| **Full Name\*** |  |
| **Date Completed\*** |  |