

Pace University

EVALUATION OF ADJUNCT PROMOTION
To Be Completed By Department Chair

Candidate's Name _____ Department
Present Rank _____ School
Campus

Promotion to the rank of

Candidate for:

Use this form to evaluate, not summarize, the details of the candidate's professional career, remarking particularly on the candidate's impact in the areas noted.

This evaluation is made by:

Signature _____ I recommend for promotion: Yes No

Name (typed) _____ Title

Date

TEACHING (please specify source of information for each)

Peer evaluation of individual's teaching effectiveness:

Student evaluation of individual's teaching effectiveness:

SCHOLARSHIP (please specify source of information for each)

Progress toward advanced degree (if not already attained):

Evaluation of individual's research and publication activity:

Evaluation of individual's participation in professional activities:

Evaluation of individual's instructional development activity:

SERVICE (please specify source of information for each)

Evaluation of individual's impact - or potential for impact - in his/her profession:

Evaluation of individual's service to students, department, school, University, and (if relevant) community:
