

## **Administrative and Professional Faculty Performance Evaluation**

*The Administrative and Professional Faculty Development, Evaluation and Recognition Policy intends to create an environment for administrative and professional faculty that promotes high performance and continuous improvement resulting in optimal efficiency and effectiveness in the delivery of services that foster student success. (VCCS Policy: 3.6.1.1)*

<b>Name of Faculty Member:</b>	<b>Position #:</b>	<b>Title:</b>	<b>Date:</b>
<b>Faculty Designation (select all that apply):</b> <input type="checkbox"/> First Year <input type="checkbox"/> Administrative <input type="checkbox"/> Professional		<b>Faculty Rank:</b>	
<b>Status:</b> <input type="checkbox"/> One-year appointment <input type="checkbox"/> Multi-year appointment		<b>Evaluation Period:</b> _____ to _____ (Date of last evaluation)                      (Date of this evaluation)	

**Instructions:** Please provide an assessment of the faculty member’s performance in the narrative sections of each of the required performance domains. Under the Annual Objectives section be sure to list out the specific objectives and select the rating category that best reflects your assessment of the faculty member’s performance, any necessary changes or extensions. Be sure to complete the Supportive Documentation Summary section as instructed.

### **Performance Domains**

<b>I. Core Responsibilities</b> <small>(VCCS Policy: 3.6.1.4.a.ii)</small>
Narrative (include areas of success, opportunities for improvement/learning and areas of concern, where applicable):

<b>II. Non-Routine &amp; Strategic Responsibilities</b> <small>(VCCS Policy: 3.6.1.4.a.ii)</small>
Narrative (include areas of success, opportunities for improvement/learning and areas of concern, where applicable):

<b>III. College and Community Service</b> <small>(VCCS Policy: 3.6.1.4.a.ii)</small>
Narrative (include areas of success, opportunities for improvement/learning and areas of concern, where applicable):

<b>IV. Professional Development &amp; Growth</b> <small>(VCCS Policy: 3.6.1.4.a.ii)</small>
Narrative (include areas of success, opportunities for improvement/learning and areas of concern, where applicable):

<b>V. Management Effectiveness</b> (if required) <small>(VCCS Policy: 3.6.1.4.a.iii)</small>
Narrative (include areas of success, opportunities for improvement/learning and areas of concern, where applicable):

<b>VI. Additional Performance Domains</b> (as approved by Supervisor)
Narrative (include areas of success, opportunities for improvement/learning and areas of concern, where applicable): test

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Annual Objectives				
	Objective Met	Agreed Upon Change	Objective not Met	Carry Over
I. Objective #1 (VCCS Policy: 3.6.1.4.b)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
II. Objective #2 (VCCS Policy: 3.6.1.4.b)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
III. Objective #3 (VCCS Policy: 3.6.1.4.b)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IV. Objective #4 (VCCS Policy: 3.6.1.4.b)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
V. Objective #5 (VCCS Policy: 3.6.1.4.b)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>NOTES</b> (i.e., general efforts, outcomes, and professional behaviors, etc.):				

<p><b>SUPPORTIVE DOCUMENTATION SUMMARY</b>  <b>[Multi-rater, self-assessment, awards, other, etc.]:</b></p> <p><b>Instructions:</b> Please summarize the supporting documentation that corroborates the designations outlined for Performance Domains and Annual Objectives.</p> <p style="text-align: right;"><input type="checkbox"/> Supporting documentation attached</p>
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Overall Summary Rating	
<i>Evaluation plans must provide for an overall summary rating of "Meet Expectations" or "Does Not Meet Expectations." (VCCS Policy: 3.6.1.4.v.)</i>	
<input type="checkbox"/> <b>Meets Expectations</b>	<input type="checkbox"/> <b>Does Not Meet Expectations</b>

<b>Signature indicates all parties have discussed this APF Performance Evaluation</b>			
<b>Employee Signature</b>	<b>Date</b>	<b>Supervisor Signature</b>	<b>Date</b>

Original: HR personnel file  
Copies: Immediate supervisor and faculty member