# APPENDIX D-2(b)

**PEER EVALUATION COMMITTEE ’S**

**EVALUATION AND RECOMMENDATION: FULL-TIME FACULTY**

Name: Click here to enter text. Department: Click here to enter text.

Date of Last Evaluation:Click here to enter text. University: Click here to enter text.

Date of This Evaluation: Click here to enter text.

Personnel Action Being Considered: Click here to enter text.

DIRECTIONS:

Evaluate each faculty member on items A through D (include E and F where applicable). CRITERIA:

1. Teaching Effectiveness (Article VIII, §A(l)(a)(i))

Click here to enter text.

1. Academic Advising (Article VIII, §A(l)(a)(ii); and Article XII, §A(3))

Click here to enter text.

1. Continuing Scholarship (Article VIII, §A(l)(b)(i))

Click here to enter text.

1. Other Professional Activities [including having more than 30 advisees] (Article VIII,

§A(1)(b)(ii))

Click here to enter text.

1. Alternative Responsibilities (Article VIII, §A(1)(b)(iii); Article XII, §D; and Article XIV)

Click here to enter text.

1. Activities Required of Professional Maritime Faculty (Article VIII-A, §B; and Article XII-A, §A(1))

Click here to enter text.

* 1. Achievements in the individual’s specialized field

Click here to enter text.

* 1. Maintenance of a proper uniform

Click here to enter text.

* 1. Contribution to maritime training and shipboard operations

Click here to enter text.

Recommendation concerning personnel action being considered:

Click here to enter text.

List the names of the committee members (to be filled in by the chair of the committee):

Click here to enter text.

Click here to enter text.

Click here to enter text.

Record of votes cast (to be filled in by the chair of the committee):

Click here to enter text. Click here to enter text.

(For) VOTE (Against) Date of Vote

Click here to enter text.

Signature of Committee Chair Date This is to certify that I have read this evaluation.

Click here to enter text.

Signature of Faculty Member Date