Submit by Email Print Form

APPENDIX E-1(a)

LIBRARY DIRECTOR'S OR LIBRARY PROGRAM AREA CHAIR'S EVALUATION AND RECOMMENDATION: LIBRARIAN

Name of Librarian: _____

Date of Last Evaluation: _____ University: _____

Date of This Evaluation: _____

Personnel Action Being Considered: _____

DIRECTIONS:

Evaluate each librarian on items A through D (include E where applicable).

CRITERIA:

A. Effectiveness in performing assigned responsibilities within the library (Article VIII, §A(3)(a)(i))

B. Effectiveness in rendering assistance to students, faculty and the academic community (Article VIII, §A(3)(a)(ii))

C. Continuing scholarship (Article VIII, §A(3)(b)(i))

D. Other professional activities (Article VIII, §A(3)(b)(ii))

E. Alternative responsibilities (Article VIII, §A(3)(b)(iii); Article XII, §D; and Article XIV)

Recommendation concerning personnel action being considered:

_____

_____ _____
Signature of Evaluator Date

This is to certify that I have read this evaluation.

_____ _____
Signature of Librarian Date