

## Skagit Valley College Faculty Review

Faculty Member: \_\_\_\_\_

Date: \_\_\_\_\_

Evaluation completed by: \_\_\_\_\_

1. **Quality of teaching/learning, counseling, or librarian services.** (Based on observation, opinionnaires, and review of appropriate learning materials, including syllabi and assessments of student learning.)
  
  
  
  
  
  
  
  
  
  
2. **Contributions to a positive institutional learning environment.** (May include elements such as student advising, curriculum and/or program development, engagement with students outside the formal learning environment, etc.)
  
  
  
  
  
  
  
  
  
  
3. **Other contributions or comments.** (May include elements such as committee work, participation in governance, collegiality, engagement with colleagues in creating positive teaching/learning environments, responsiveness to or engagement with the community; this may include industry, community service agencies, schools, etc.)

Faculty comments:

Faculty signature: \_\_\_\_\_

Administrator signature: \_\_\_\_\_

List of Attachments: \_\_\_\_\_

*At request of faculty. (Summary of opinionnaires, observation form, peer review, SGID, self evaluation, etc.)*