

**San Jose-Evergreen Community College District**  
**SUMMARY EVALUATION REPORT FOR TENURE-TRACK FACULTY**

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Faculty Member: \_\_\_\_\_ Date of Hire: \_\_\_\_\_

Evaluation Period: \_\_\_\_\_ \_\_\_ Check if timelines have not been followed

Reviewed recommendation(s) from previous evaluation, if applicable Yes ( ) No ( )

For items below, see Article 20.6
A. Demonstrated Competency in Performing Professional Responsibilities
B. Worked effectively with the campus community
C. Met organizational criteria
D. Demonstrated progress in Professional Growth and Development

**Committee’s Overall Evaluation:** (check one recommendation below)

\_\_\_ **Distinguished Performance** – exceeds the requirements of the assignment. The evaluation shall include notations of exceptional performance.

\_\_\_ **Proficient Performance** – meets the requirements of the assignment. The evaluation may include notations of exceptional performance.

\_\_\_ **Needs Improvement** – to meet the requirements of assignment. The evaluation shall include notations of areas to be improved. An Improvement Plan is required as per section 20.9.

\_\_\_ **Does Not Meet the Requirements of Assignment** –The evaluation shall include specific areas of unsatisfactory performance. If this recommendation is made an Improvement Plan is required as per section 20.9.

Complied with self-evaluation component.

**Evaluation Committee:**

Committee Member: \_\_\_\_\_  
Type/Print
Signature
Date

Committee Member: \_\_\_\_\_  
Type/Print
Signature
Date

Immediate Administrator/Designee: \_\_\_\_\_  
Type/Print
Signature
Date

Tenure-Track Faculty Member's Comments (optional): \_\_\_\_\_

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Tenure-Track Faculty Member's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

President's Comments: \_\_\_\_\_

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**President's Recommendation:** (Check one recommendation below)

\_\_\_ **Distinguished Performance** – exceeds the requirements of the assignment. The evaluation shall include notations of exceptional performance.

\_\_\_ **Proficient Performance** – meets the requirements of the assignment. The evaluation may include notations of exceptional performance.

\_\_\_ **Needs Improvement** – to meet the requirements of assignment. The evaluation shall include notations of areas to be improved. An Improvement Plan is required as per section 20.9.

\_\_\_ **Does Not Meet the Requirements of Assignment** –The evaluation shall include specific areas of unsatisfactory performance. If this recommendation is made an Improvement Plan is required as per section 20.9.

President's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

<b>FOR OFFICE USE ONLY</b>
Received in the District Human Resources Office
Received by (initials): _____ Date Received: _____