# California State University, Long Beach

# Reappointment, Tenure, and/or Promotion

# Department-Level Evaluation and Recommendation Form

This form is to be used for candidates being evaluated under University RTP Policy PS 09-10

Candidate Name:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Department or Academic Unit Name:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

College:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Academic Year:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Consideration for (check all that apply):

Reappointment Tenure Promotion Early

Associate

Full

## Instruction and Instructionally-Related Activities

The purpose of this section is to provide an evaluation of the candidate’s instruction and instructionally related activities during the period under review. Committee members shall consider all material submitted in the RTP file including the narrative, PDS, and supplementary file.

1. Instructional Philosophy and Practice

Evaluate each of the following, citing relevant evidence provided in the candidate’s file:

1. The candidate’s reflection on his/her teaching practices, including impact on student learning.
2. The candidate’s efforts to improve instructional effectiveness.
3. Alignment of the candidate’s instructional practices with course/curriculum goals and campus instructional policies.
4. The candidate’s professional development activities.
5. Student Learning Outcomes

Evaluate each of the following, citing relevant evidence provided in the candidate’s file:

1. Effectiveness of instructional practices and course materials in conveying the learning goals and student outcomes.
2. Use of appropriate assessment methods.
3. Other evidence of student learning, if applicable.
4. TABLE: Student Response to Instruction (or College Alternative Table)

Fill in Student Response to Instruction data from item #8 on the “old” form and item #5 on the SPOT form and provide GPA data.

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Acad Sem** | **Course No.** | **No. of Students Enrolled** | **No. of Students Responding** | **Cand Mean** | **Cand SD** | **Dept Mean** | **Dept SD** | **School Mean** | **School SD** | **Class GPA** | **Dept GPA at Same Level (LD, UD,GR)** |
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1. Student Response to Instruction (Course Evaluations)
2. Evaluate the Student Response to Instruction data in Table 1 (including GPA, if specified by college or department policy).
3. Evaluate other items from the Student Response to Instruction summaries, including the written comments if applicable.
4. Evaluate other evidence of effectiveness in instruction and instructionally-related activities, including peer evaluation of instruction, if applicable.

## Research, Scholarly, and Creative Activities

The purpose of this section is to provide an evaluation of the candidate’s research, scholarly and creative activities during the period of review. Committee members shall consider all material submitted in the RTP file including the narrative, PDS, and supplementary file.

1. Briefly summarize the candidate’s research, scholarly and creative activities, indicating peer-reviewed work.
2. Evaluate the candidate’s research, scholarly and creative activities, with particular attention to peer-reviewed work.
3. Assess the extent to which the candidate’s research, scholarly and creative activities contribute to the advancement, application, or pedagogy of the discipline or interdisciplinary studies.
4. Evaluate the extent to which the candidate has met department/college expectations for significant and on-going research, scholarly and creative activities as appropriate to action (reappointment, tenure and/or promotion).
5. If appropriate, evaluate other evidence of contributions to research, scholarly and creative activities.

## Service

The purpose of this section is to provide an evaluation of the candidate’s service to the department, college, university, profession, and/or community. Committee members shall consider all material submitted in the RTP file including the narrative, PDS, and supplementary file.

1. Briefly summarize and evaluate the candidate’s service activities during the period of review, including:
2. The department
3. The college
4. The university
5. The profession and/or community
6. Address whether the candidate has met the department/college expectations for service to the department, college, university, and to the profession and/or community.
7. If appropriate, evaluate other evidence of contributions to service.

## Conclusions and Recommendations

The purpose of this section is to provide an overall evaluation of the candidate’s file. The committee also must provide a specific recommendation for each action under consideration (i.e., reappointment, tenure, and/or promotion).

This statement should not summarize the candidate’s activities, but should express the committee’s judgments of the candidate’s performance and achievements in relation to the department, college, and University criteria and expectations.

## Signatures of Department Committee Members

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Committee Chair Signature Date Print Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Committee Member Signature Date Print Name

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 Committee Member Signature Date Print Name

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 Committee Member Signature Date Print Name

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 Committee Member Signature Date Print Name

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 Committee Member Signature Date Print Name

For each action under consideration please indicate committee recommendation, as appropriate, including the number of votes in favor, number of votes against.

**COMMITTEE VOTE: Date\_\_\_\_\_\_\_\_\_\_\_**

**Reappointment** Affirmative Votes\_\_\_\_ Negative Votes\_\_\_\_ Minority Report: NO Yes (must be attached)

**Tenure** Affirmative Votes\_\_\_\_ Negative Votes\_\_\_\_ Minority Report: NO Yes (must be attached)

**Promotion** Affirmative Votes\_\_\_\_ Negative Votes\_\_\_\_ Minority Report: NO Yes (must be attached)

## Signature of Candidate

I have read the Department summary and evaluation, the Chairman's recommendation (if any), and the accompanying dossier and to the best of my knowledge the file is complete and includes supportive documentation as cited by the RTP Committee. My signature indicates neither agreement nor disagreement with the statements made.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature Date

I have read the minority report(s), if any. My signature indicates neither agreement nor disagreement with the statements made.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature Date