

MENDOCINO COLLEGE
INSTRUCTOR EVALUATION

EXHIBIT 2

Form A - Evaluation Summary (Rev. 5/22)
Link to Instructional Evaluation Guide: [Evaluations](#)

Instructor:

Course(s):

Date:

Evaluators:

For Part Time Faculty (Mark Evaluator Type)

_____ Full Time Faculty Discipline Peer
_____ Dean

_____ Full Time Faculty (Related Discipline)

Each evaluation team member is to include a rating, comments and recommendations for the criteria below based on course observation, course materials reviewed, student surveys, and information provided in the self-assessment.

Recommendations are required for B and C rankings. Constructive feedback is encouraged in all cases but not required with an A ranking.

1. Teaching Ability (mark one):

- _____ A. Meets professional standards (include comments which support this rating)
_____ B. Needs Improvement (identify recommendations for improvement below)
_____ C. Unsatisfactory (specify in comment section)

Comments:

Recommendations:

2. Course Organization & Materials (mark one):

- _____ A. Meets professional standards (include comments which support this rating)
_____ B. Needs Improvement (identify recommendations for improvement below)
_____ C. Unsatisfactory (specify in comment section)

Comments:

Recommendations:

3. **Student-Centered Environment** (*mark one*):

- A. Meets professional standards (include comments which support this rating)
- B. Needs Improvement (identify recommendations for improvement below)
- C. Unsatisfactory (specify in comment section)

Comments:

Recommendations:

4. **Professional Responsibilities**, as indicated in Article 7 - see MLCCD/MCFT contract for examples of full time faculty responsibilities OR Article 18 – see MLCCD/MPFA Contract for examples of part time faculty responsibilities (*mark one*):

- A. Meets professional standards (include comments which support this rating)
- B. Needs Improvement (identify recommendations for improvement below)
- C. Unsatisfactory (specify in comment section)

Comments:

Recommendation:

RECOMMENDATION:

- Continue on regular evaluation schedule
- Re-evaluate during next Mendocino College teaching assignment
- Corrective Action Plan assigned (see below)
- Other (explain):

Corrective action plan (include deadline):

CERTIFICATION OF COMPLETION:

_____	_____
FT Faculty Evaluator	Date
_____	_____
Administrative Evaluator	Date
_____	_____
Academic Senate President (if non-Peer Evaluator)	Date
_____	_____
Dean	Date

Faculty signature indicates awareness of the report only.

I wish to exercise my option to attach written comments regarding any portion of the evaluation. If so, written comments should be submitted within 10 days of the above date.

_____ YES _____ NO

_____	_____
Evaluee	Date
_____	_____
Vice-President, Academic Affairs	Date