

**ALAMO COLLEGES**  
**ANNUAL REPORT: FACULTY SELF-EVALUATION**

Name: \_\_\_\_\_ Evaluation Period From \_\_\_\_\_ to \_\_\_\_\_  
Department: \_\_\_\_\_ Banner ID #: \_\_\_\_\_  
Rank: \_\_\_\_\_ Tenure: Yes \_\_\_\_\_ No \_\_\_\_\_ Date of Employment: \_\_\_\_\_  
NLC \_\_\_\_ NVC \_\_\_\_ PAC \_\_\_\_ SAC \_\_\_\_ SPC \_\_\_\_ Dept. Chairperson/Supervisor: \_\_\_\_\_

**GENERAL STATEMENT**

This report is intended to provide an opportunity for a faculty member to:

- (1) document activities, honors, professional memberships, etc. that assist in professional growth;
- (2) list services provided to the department, college, district, and/or community;
- (3) reflect on her/his work as a professional, recognizing strengths and areas for growth;
- (4) use the self-evaluation establish goals and objectives for next year;
- (5) describe what services could be provided the faculty member to enhance professional work.

**RESPOND IN EACH CATEGORY**

**TEACHING/COUNSELING/LEARNING RESOURCES:**

- 1) For the past year, describe your greatest strength or your most effective teaching skills.
  
- 2) How could you better capitalize on this strength or these skills in the coming year?
  
- 3) What professional skills might you want to improve upon or develop further?
  
- 4) What are some of the ways you can accomplish the objective cited in Number 3?
  
- 5) What could the department/college/district provide for you to help you become more effective in teaching/counseling/library services?

**FACULTY SERVICE:**

- 6) List committee assignments and/or school activities/organizations (department, college, district):

7) List development of course content or curriculum, participation in selection of textbooks, materials, instructional materials, etc.

8) Other activities not covered in 1-5 (e.g. community activities, etc.)

**PROFESSIONAL GROWTH:**

9) List professional activities: (e.g. conferences/seminars attended, publications, presentations, curricula and/or course development, Faculty Development participation:

10) List professional honors received or offices held:

11) List professional memberships:

12) List any courses taken: (in or related to teaching/professional field)\*

\*(Prior approval of courses, seminars, and workshops must be obtained on course approval form.)

**OVERALL APPRIASAL:**

- 5 **OUTSTANDING:** performs very well; a model for other instructors.
- 4 **GOOD:** performs well; demonstrates above average teaching qualities.
- 3 **SATISFACTORY:** performs in middle range; demonstrates average teaching skills.
- 2 **MARGINAL:** demonstrates minimally acceptable teaching skills; some changes should be made to improve instruction; needs required faculty development.
- 1 **UNSATISFACTORY:** does not meet minimum requirements; major changes should be made to improve instruction.
- 0 **NOT APPLICABLE:** not able to observe/not relevant.

**SIGNATURES**

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

\_\_\_\_\_  
Date

REVIEWED BY:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date