Tenure Year 1 Supportive Evaluation Form (Spring 2021 Hires Only)

The instructions for completing this form are available at http://afa-srjc.org/Forms/Faculty_SuppTR1_S21_Instr.pdf.

Section I	Evaluee	Information				_
Name				Department:		
Assignme	nt Type:	Instructional	Counseling	DRD	Librarian	Athletic Coach
Section II	Student	Contact Observation	ns			
Date and	Activity of O	bservation by Peer				
The	Peer and Ev	valuee have conferred	as instructed.	Date		
Date and	Activity of O	bservation by Chair				
The	Chair and E	valuee have conferred	d as instructed.	Date _		
Date and A	Activity of O	bservation by Sup Adi				
The	Supervising	Admin and Evaluee ha	ve conferred as instru	ıcted. <i>Date</i> _		
Section II	I Team Re	eview and Signature	s			
The Team	has conferr	ed and (check one):				
		,	t the Evaluee has sa	tisfied Vear 1 ⁻	Tenure Review obli	gations for Spring 2021
			•			during weeks 10-15.
	ervations.)	attach a document tha	at explains the speci	ilic reasons ic	of the necessity to	periorii ioriilai
	,	able to reach a conse	nsus <i>(</i> The Team wil	Lattach a do	rument that expla	ins the specific
		ing the team from rea	•		odmont that expla	mo the opcome
	, , , , , , , , , , , , , , , , , , ,		g	•		
Peer:						
	Print Name		Sign		Da	ite
Chair:						
	Print Name		Sign		Da	nte
Sup Adm:			_			
	Print Name		Sign		Da	ite
Section I\	/ Evaluee	s Acknowledgemen	t of Team Review			
	•	eiving the team's revi ignature does not imp	•			ch Team member.
Sign:				Da	to:	
oigii.	-		_	Da		