PERALTA COMMUNITY COLLEGE DISTRICT

**SUMMARY REPORT FORM**

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| **Semester** | | **Academic Year** | | **College** | |
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| **Tenure Candidate Name** | | **Discipline** | | **Date of Tenure Review Conference** | |
| **Members of the Tenure Review/Evaluation Committee** | | | | | |
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| **TRC Chair** | **Member** | | **Member** | | **Dean/Supervisor** |
| **1. Self-Evaluation Report(s)** | | | | | |
| *The TRC/Evaluation Committee has reviewed the candidate’s Self-Evaluation(s), and makes the following observations:* | | | | | |
| **2. Student Evaluations** | | | | | |
| *The TRC/Evaluation Committee has reviewed the student evaluation reports, if applicable, and makes the following observations:* | | | | | |
| **3. Administrative Evaluation** | | | | | |
| *The TRC/Evaluation Committee has reviewed the Administrative Evaluation, and makes the following observations:* | | | | | |
| **4. Faculty Observations/Evaluations** | | | | | |
| *The TRC/Evaluation Committee has reviewed materials and conducted observations of the class(es)/session(s)/learning experience(s). The TRC/Evaluation Committee makes the following observations:* | | | | | |
| **Commendations:** | | | | | |

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| **Recommendations;** |
| **5. Peer and Other Evaluation(s).** *The TRC/Evaluation Committee has reviewed other evaluative evidence, including submissions from other members of the candidate’s department/discipline, and materials submitted by the candidate. The TRC/Evaluation Committee makes the following observations:* |
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| **6. Comment on the candidate’s knowledge base.** *Include in the comments how the candidate demonstrated that s/he is knowledgeable about the material being presented. When appropriate, did the candidate show evidence of knowledge about current issues in the discipline? Did the style of session/presentation indicate that the candidate is aware of differences in how students learn? In what way?* |
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| **7. Comment on the candidate’s ability to apply his/her knowledge base.** *Include in the comments such things as clarity of presentation of material. How were student/staff questions about the material handled? Did the candidate demonstrate the ability to provide links between new and familiar material? How? Did the class/session/learning experience include useful examples and varying viewpoints?* |
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| **8. Comment on the candidate’s interpersonal skills including her/his ability to motivate students.** *Include in the comments whether the candidate showed enthusiasm for her/his profession. What kinds of attitudes about students’ ability to learn were projected? Were students/staff treated with respect, and were cultural and individual differences accommodated? In what ways? Did the candidate create an environment that was productive/conducive to learning? How?* |

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| **9. Overall assessment of the candidate**. *Include in the comments specific strong points, and specific areas for improvement. Include any recommendations you have for the candidate.* | | | | | | | |
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| **10. Overall Performance Rating** | | | | | | | |
|  | **Superior***—surpasses requirements; exceeds expectations* | | | | | | |
|  | **Satisfactory***—meets all standards of excellence as described in the policy* | | | | | | |
|  | **Below Standards**—*does not consistently meet requirements* | | | | | | |
|  | **Unsatisfactory**—*does not meet requirements; ineffective* | | | | | | |
| **For Tenure Track Candidates Only** | | | | | | | |
| The TRC makes the following recommendation for this probationary faculty member | | | | | | | |
|  | **Continue Probation** | | **Number of Votes** | | | | |
|  | **Termination of Service** | |  | | |  | |
|  | **Grant Tenure-***4th Year Candidates Only* | | **For Recommendation** | | | **Against Recommendation\*\*** | |
| \*\* A member of the TRC who is in disagreement with the recommendation may attach a minority report to this  recommendation. | | | | | | | |
| **Minority Report Attached** | |  | | **YES** |  | | **NO** |
| **SIGNATURES** | | | | | | | |
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| **TRC/EC Chair** | | | | **Date** | | | |
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| **TRC/EC Member** | | | | **Date** | | | |
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| **TRC/EC Member** | | | | **Date** | | | |
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| **Dean/Supervisor** | | | | **Date** | | | |
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| *The candidate’s signature on this form only indicates that s/he has reviewed this evaluation/ recommendation form. Such*  *comments must be submitted by the deadline specified in the Timeline for Tenure Review.* | | | | | | | |
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| **Tenure Candidate** | | | | **Date** | | | |