

Q3 Do you wish to provide additional comments regarding any of the items in Q1?

Yes

Go to Q4

No

Go to Q5

Q4 Please use the space at the right to provide additional comments for any or all of the items listed below. Each text box will capture up to 400 characters, or about one paragraph.

Promotes an environment that enhances quality.

Fosters collaboration across organizational boundaries.

Manages resources well in support of the University's mission.

Inspires confidence in the University's senior leadership.

Contributes positively to the University's image and reputation.

Shares relevant information on key issues with appropriate constituencies.

Is an effective team member.

Takes actions to avoid, minimize, or resolve problems before they expand.

Actively fosters and promotes diversity.

Responds appropriately to enforce institutional policies.

Q5 Overall, how satisfied are you with your working relationship with the CAO?

- Not Applicable/ Not Enough Information*
- Very Satisfied*
- Satisfied*
- Neither Satisfied Nor Dissatisfied*
- Dissatisfied*
- Very Dissatisfied*

Q6 Identify the CAO's primary strengths. (Comments may appear truncated after they are typed. Responses limited to 9,000 characters, or about 20 paragraphs.)

Q7 Identify areas for improvement in the CAO's performance. (Comments may appear truncated after they are typed. Responses limited to 9,000 characters, or about 20 paragraphs.)

Q8 Please describe your position in relation to the University.

- Dean*
- Executive Vice President / Vice President*
- Assistant Provost / Vice Provost / Associate Provost*
- Assistant Vice President / Associate Vice President*
- Director / Executive Director*
- Assistant Dean / Associate Dean*
- Department Chair*
- Faculty / Emeritus Faculty*
- Other University of Kentucky Staff*
- Other External to the University*
- Other*

If you selected "Other," please specify:

Q9 How often do you have direct contact with the CAO?

- On a daily basis*
- Weekly, but not daily*
- 1-3 times a month*
- 1-3 times a semester*
- Less than 1 time a semester*
- Do not have contact*

Q10 **If applicable, how long have you been at the University of Kentucky?**

- Less than a year*
- 1-2 years*
- 2-3 years*
- 3-5 years*
- More than 5 years*

Q11 **Please indicate your gender.**

- Male*
- Female*

Thank you for participating in this evaluation. Please select "Submit" to record your response.