

**COLLEGE OF HEALTH SCIENCES  
UNIVERSITY OF KENTUCKY**

**Faculty Performance Review**

**Check the appropriate review period:**

Calendar Year 2013

**Faculty Name:** \_\_\_\_\_

**UK ID Number:** \_\_\_\_\_

**Academic Program:** \_\_\_\_\_

**Contract Period (10, 11, 12 mos.):** \_\_\_\_\_

**Rank/Title Series:** \_\_\_\_\_

**Overall Honors and Awards**

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**Review Summary** (Final Summary to be completed by Chair; drafts completed by Division/Program Director)

Area of Effort	% Distribution of Effort			Rating <sup>3</sup>
	Spring 2013 <sup>1</sup>	Fall 2013 <sup>1</sup>	Overall <sup>2</sup>	
I. Instruction				
II. Research				
III. Service (including patient care unrelated to instruction)				
IV. Administration				
V. Professional Development				
			<b>Overall Rating</b>	

Note 1. Spring 2013 = 2012-2013 DOE%; Fall 2013 = 2013-2014 DOE%.

Note 2. Overall = Total of Spring 2013, Fall 2013 DOE%/2

Note 3. Select rating: Exceptional Contribution; Exceeds Expectations; Reasonable and Positive Contribution; Needs Improvement; Failed to Make a Reasonable Contribution.

**Evaluator's Narrative:**

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I accept this evaluation

I disagree and may appeal this evaluation

**Faculty Member Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Chair Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Dean Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**I. Instruction**

**Overall DOE Allocation: \_\_\_\_\_%**

**A. Teaching and Advising Honors and Awards**

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**B. Teaching Portfolio Evaluation**

<b>TEACHING EVALUATION</b>		
Criteria	Included	Remarks
Reflective statement which describes teaching and advising assignments.		
List of all courses taught, including title, course number, number of students enrolled, and a brief description.		
Representative course syllabi.		
A quantitative and qualitative summary of student evaluations.		
Other:		
<b>ADVISING EVALUATION</b>		
Criteria	Included	Remarks
Reflective statement which describes the nature and extent of advising.		
The number and level of undergraduate and graduate advisees, and a list of all master's and doctoral students for whom the instructor served as a member of a committee.		
A list of those students for whom the professor served as preceptor, or director of a thesis or dissertation.		
Summary of activities associated with student organizations and service on student-faculty committees.		
Student evaluation of advising.		
Other:		

**C. Teaching**

Term and Year	Course Prefix / #	Course Name	Credit Hrs.	# of Students Enrolled	% Resp.	TCE Item #20 (course value)	TCE Item #21 (teaching quality)	Remarks (special course or topics; unique circumstances; alternative eval for small classes, etc.)

**Other Credit and Non-Credit Instruction**

Instruction Type	Description/Topic	Course Title	Begin/End Dates

**D. Advising**

Type of Advisees/Activity	Number of Students	Remarks (student names, special activities or circumstances)
Undergraduate Students		
Graduate Students / Academic		
Professional Students / Academic		
Capstone Project Committee Chair		
Capstone Project Committee Member		
Master's Thesis - Chair		
Master's Thesis - Committee		

Faculty Performance Review: Calendar Year 2013

Ph.D. Committee - Chair		
Ph.D. Committee - Co-Chair		
Ph.D. Committee - Committee		
Postdoctoral Students / Fellows		
Directed Student Learning (excluding theses, dissertations and postdoctoral supervision)		

**E. Faculty Remarks**

(Include additional teaching and advising activities not listed; non-sponsored educational enhancement grants or educational grants from other sources; sponsored instruction; substantive curriculum revision or development, continuing education offerings, student advising evaluations, etc.)

**F. Evaluator Remarks**

(Include comments about faculty performance in instruction, suggested areas for improvement, etc.)

**II. Research**

**Overall DOE Allocation: \_\_\_\_\_ %**

**A. Research Honors and Awards**

**B. Grants and Contracts**

**Proposals Submitted (OSPA)**

Project Title	Role (PI/Co)	% Time Allocated	Sponsor	Total \$ Value	Duration (start/end dates)	Status (pending, not funded)

**Proposals Newly Awarded / In Force (OSPA)**

Project Title	Role (PI/Co)	% Time Allocated	Sponsor	Total \$ Value	Duration (start/end dates)	Status / Remarks

**Research Grants (Non-OSPA)**

Project Title	Role (PI/Co)	% Time Allocated	Sponsor	Total \$ Value	Duration (start/end dates)	Status / Remarks

**C. Other Research and Scholarship activities during review period (list under appropriate heading using APA or AMA style)**

1. Refereed journal articles published
2. Refereed journal articles in-press or accepted for publication (not to include accepted w/ revisions)
3. Refereed journal articles presently under review (not to include articles in preparation, but not submitted)

4. **Published abstracts, as appropriate to your profession**
5. **Books published or in press**
6. **Book chapters published or in press**
7. **Intellectual property (e.g., patents & copyright)**
8. **Published reviews, commentaries, reports, etc.**
9. **Conference presentations or papers (Not including invited presentations)**
10. **Invited presentations**
11. **Innovative instructional materials, teaching technologies or aids, clinical tools published**

**D. Faculty Remarks**

(Include additional research or scholarly activities not listed, special considerations, etc.)

<b>ADDITIONAL RESEARCH PROJECTS IN PROGRESS</b>	
Name of research project	Progress to date (please be specific)

**E. Evaluator Remarks**

(Include comments about faculty performance in scholarly activities, suggested areas for improvement, etc.)

**III. Service** **Overall DOE Allocation: \_\_\_\_\_%**

**A. Service Honors and Awards**

**B. University Committee/Task Force Activities**

Level	Committee / Task Force Name	Role	Duration	Remarks

**C. Community Service activities related to your professional expertise & mission of the university**

Activity	Agency or Sponsor	Role	Duration	Remarks

**D. Professional Service activities (List under relevant section; indicate whether local, regional, national, or international)**

1. **Professional Organization Membership**
2. **Offices held and committee memberships; ad-hoc committees (e.g., conference organization)**
3. **Journal editor or reviewer; book reviewer as appropriate**
4. **Grant review panel/study section participant or chair**
5. **Accreditation site visit or external program reviewer**

**E. Consulting activities (list program or organization; describe activity; time involved)**

**F. Media contributions (e.g., interviews, editorial written, etc.)**

**G. Patient Care**

**Overall DOE Allocation:** \_\_\_\_\_

*\* Provide Evaluation Letter from primary supervising physician/practitioner with Performance Evaluation Packet*

**H. Faculty Remarks**

(Include additional service and patient care activities not listed, special considerations, etc.)

**I. Evaluator Remarks**

(Include comments about faculty performance in service, suggested areas for improvement, etc.)

**IV. Administration**

**Overall DOE Allocation:** \_\_\_\_\_

**A. Administration Honors and Awards**

**B. Administrative Assignment** (Department Chair, Division/Program Director, Director of Graduate Studies, etc.)

Assignment	DOE Allocation	Remarks

**C. Faculty Remarks**

(Include additional official administrative activities not listed, special considerations, etc.)

**D. Evaluator Remarks**

(Include comments about faculty performance in administration, suggested areas for improvement, etc.)

**V. Professional Development**

**Overall DOE Allocation:** \_\_\_\_\_%

**A. Professional Development Honors and Awards**

**B. Professional Development Activities**

Activity	% DOE	Start/End Date	Remarks
Sabbatical			
Education			Progress in coursework, quals, dissertation, etc.
Other Leave			Type of leave, activities

**C. Professional conferences and other continuing education events attended**

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**D. Faculty Remarks**

(Include additional professional development activities not listed, special considerations, etc.)

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**E. Evaluator Remarks**

(Include comments about faculty performance in scholarly activities, suggested areas for improvement, etc.)

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