



UNIVERSITY OF
**NORTHERN
COLORADO**

Pre-Tenure Comprehensive Review

** Pre-tenure review shall note degree of progress toward tenure/promotion and what further achievements are expected for tenure/promotion and will include scores and reasons based on the program area's approved criteria. (BPM 2-3-801(2)(b))*

Faculty Information

Name: _____

College: _____

Department/School/Program: _____

Current Rank:

☐ Assistant Professor

☐ Associate Professor

☐ Full Professor

Date hired in TT position at UNC: _____

Review Period: _____ to _____
(year) (year)

This faculty member was awarded the following credit toward tenure and/or promotion:

Years of tenure credit: _____ Years of promotion credit: _____

If awarded credit, attach documentation.

| Workload percentages for the review period: | | | Service | |
|---|-------------|-----------------------|------------------------|----------------------------|
| | Instruction | Professional Activity | Chair Responsibilities | Non-Chair Responsibilities |
| Percentage: | | | | |

Evaluation Scale (Round to the nearest 10th)

| Evaluation Level | Score | |
|------------------|---------|----------------------|
| V. | 4.6-5.0 | Excellent |
| IV. | 3.6-4.5 | Exceeds Expectations |
| III. | 2.6-3.5 | Meets Expectations |
| II. | 1.6-2.5 | Needs Improvement |
| I. | 1.0-1.5 | Unsatisfactory |

Please consult BPM: 2-3-801(2) http://www.unco.edu/trustees/policy_manual.pdf and University Regs: 3-3-801 (1) http://www.unco.edu/trustees/University_Regulations.pdf

Part I: Evaluation by Faculty

For Tenure-Track Review: Number of participating tenure/tenure-track faculty assigning a score: _____

For Contract-Renewable Review: Number of tenured, tenure-track, contract-renewable faculty assigning a score: _____

In accordance with approved department/school/program procedures for comprehensive evaluation of the unit's faculty, the following method was used for scoring:

☐ mean ☐ median ☐ mode/vote

| Evaluation by Faculty | | | Service | |
|---|-------------|-----------------------|------------------------|----------------------------|
| | Instruction | Professional Activity | Chair Responsibilities | Non-Chair Responsibilities |
| Score | | | | |
| Evaluation Level (I, II, III, IV, V) | | | | |

Attach a memo explaining the reasons, in terms of the approved program area criteria, for the scores.

Signature (on behalf of the faculty): _____ Date: _____

Evaluatee notified of decision by:

Email (Date): _____ Campus Mail (Date): _____

(If evaluatee is Chair, Director, or Program Coordinator, after completing Part I, send form and materials to Dean.)

Part II: Evaluation by Chair/Director or Program Coordinator

| | | | Service | |
|---|-------------|-----------------------|------------------------|----------------------------|
| | Instruction | Professional Activity | Chair Responsibilities | Non-Chair Responsibilities |
| Score | | | | |
| Evaluation Level (I, II, III, IV, V) | | | | |

Attach a memo explaining the reasons, in terms of the approved program area criteria, for the scores.

Signature: _____ Date: _____

Evaluatee and faculty notified of decision by:

Email (Date): _____ Campus Mail (Date): _____

Part III: Dean Review

The Dean reviews the evaluations of the program area faculty and the chair/director/coordinator to verify that the scores assigned, and the reasons given, are consistent with the approved program area criteria and procedures. If the Dean finds that the evaluation is not consistent with approved program area criteria or process, he or she communicates that finding, in writing, with reasons, to the program area faculty, the chair/director/coordinator and the evaluatee. In case of such disagreement, the dean will indicate what scores he/she believes were warranted by the program area's criteria.

| | | | Service | |
|---|-------------|-----------------------|------------------------|----------------------------|
| | Instruction | Professional Activity | Chair Responsibilities | Non-Chair Responsibilities |
| Score | | | | |
| Evaluation Level (I, II, III, IV, V) | | | | |

Signature: _____ Date: _____

Evaluatee, faculty, and Chair/Director/ Program Coordinator notified of decision by:

Email (Date): _____ Campus Mail (Date): _____

Part IV: CAO Review

The CAO reviews the evaluations of the program area faculty, the chair/director/coordinator, along with the dean's findings and determines whether or not the evaluations are consistent with the approved criteria and procedures. If the CAO disagrees with the scores assigned by the faculty and/or chair/director/coordinator, he or she must determine what scores were warranted by the program area's criteria.

| | Instruction | Professional Activity | Service | |
|---|-------------|-----------------------|------------------------|----------------------------|
| | | | Chair Responsibilities | Non-Chair Responsibilities |
| Score | | | | |
| Evaluation Level (I, II, III, IV, V) | | | | |

Signature: _____

Date: _____

Evaluatee, faculty, Chair/Director/ Program Coordinator, and Dean notified of decision by:

Email (Date): _____

Campus Mail (Date): _____