

MASSACHUSETTS COMMUNITY COLLEGE SYSTEM
PART-TIME FACULTY SUMMARY EVALUATION

Faculty Member: _____

Department/Program: _____

Division: _____

Evaluator: _____ Title: _____

1. Overall Student Evaluation Scores for each Class - **FIRST APPOINTMENT:**

<u>Class and Section</u>	<u>Score</u>
1.	1.
2.	2.
3.	3.
4.	4.

Average Score for all Classes: _____

Student Evaluation - Evaluator's Comments:

Course Materials - Evaluator's Comments

Personnel File Review - Evaluator's Comments

Faculty Member's Comments (If any)

1. Overall Student Evaluation Scores for each Class - **SECOND APPOINTMENT:**

<u>Class and Section</u>	<u>Score</u>
1.	1.
2.	2.
3.	3.
4.	4.

Average Score for all Classes: _____

Student Evaluation - Evaluator's Comments:

Course Materials - Evaluator's Comments

Personnel File Review

Faculty Member's Comments (If any):

Overall Student Evaluation Scores for each Class - **THIRD APPOINTMENT:**

<u>Class and Section</u>	<u>Score</u>
1.	1.
2.	2.
3.	3.
4.	4.

Average Score for all Classes: _____

Student Evaluation - Evaluator's Comments:

Course Materials - Evaluator's Comments

Personnel File Review

Classroom/Instructional Performance - **SEE ATTACHMENT:**

Evaluate overall performance of instructor:

Faculty Member's Comments (If any):

I have read and received a copy of
this evaluation

Evaluator

Faculty Member

Date

Date

If the faculty member wishes to respond to the evaluation, the faculty member must do so within seven (7) working days.