(1601-2020) CID Faculty Self-Evaluation

**NOTE: You will be signed out of Faculty180 after 60 minutes of inactivity for security reasons. Please save your work accordingly.**It is recommended to prepare your evaluation narratives in a [Word document version of the form](https://www.boisestate.edu/academics-deptchairs/faculty180/faculty-resources/annual-evaluation-forms/) before entering it into this evaluation form. If you will be away from your desk for an extended time, place a character/number in any/all required fields and save your work so as not to lose it. **New as of CY 2020**: Past calendar year's semester workloads and current spring workload are now entered in the new **Workload** section under "Activities". Only the past CY workload will appear in the annual activity report.

**ALSO NOTE:** **Do not** hit the 'Evaluate' button while you have an evaluation form opened, even if it's minimized. This will reload the form, and you will lose any unsaved progress.

**Instructions**

Faculty, please use this form to conduct a self-evaluation of your performance for the past calendar year, as well as to discuss goals for the current calendar year.

Only use the Attachments section at the bottom of this form to load a Sabbatical report, if you participated last year. Other documents should be attached directly to the relevant Activities section entry.

* Examples:
* Course syllabi, evaluations, and classroom observation reports --> TEACHING - Credit Courses
* Article PDFs or video of play production --> RESEARCH - Scholarly and Creative Contributions

AEvaluation Period

|  |  |
| --- | --- |
| **Past Calendar Year\*** |  |

BLong Term Goals and Vision

This section should articulate your current vision for your career and your program. Goals should be high order expressions of your vision. This is not meant to be binding in any way and is acknowledged, in fact, expected, that your long-term goals and vision will change over time. However, this material should act as a guide to activities and should broadly project future products and impact.

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| **Long Term Goals and Vision\*** | 11pt    4 WORDS |

CNarratives - Past Calendar Year

In each of these narratives, first describe the activities that made up your workload over the past year; second, please indicate the value and impact of those activities. All fields in this section are required; if a category is not in your workload, indicate with "N/A".

|  |  |
| --- | --- |
| **Teaching Narrative (past calendar year)\*** | 11pt    4 WORDS |
| **Scholarship Activities Narrative (past calendar year)\*** | 11pt    4 WORDS |
| **Service Activities Narrative (past calendar year)\*** | 11pt    4 WORDS |
| **Administration Narrative (past calendar year)\*** | 11pt    4 WORDS |

DGoals for the Upcoming Calendar Year

In this section, first describe your planned activities (scholarship, teaching, service, administration) that will make up your workload in the coming year; second, articulate the value and impact of those planned activities.

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| **Goals for Next Year\*** | 11pt    4 WORDS |

EPlanned Workload for Fall (next academic year)

Workload distribution should total 50% for each semester. (Standard default percentages are shown.) The percentages entered here should reflect the planned distribution of work for the upcoming fall as you know them as of the date you complete this form.

|  |  |
| --- | --- |
| **Current Fall Calendar Year\*** |  |
| **Teaching % (next Fall)\*** |  |
| **Scholarship Activities % (next Fall)\*** |  |
| **Service Activities % (next Fall)\*** |  |
| **Administration % (next Fall)\*** |  |
| **Leave/Offset % (next Fall)\*** |  |

FPlanned Workload for Spring (next academic year)

Workload distribution should total 50% for each semester. (Standard default percentages are shown.) The percentages entered here should reflect the planned distribution of work for next spring as you know them as of the date you complete this form.

|  |  |
| --- | --- |
| **Next Spring Calendar Year\*** |  |
| **Teaching % (next Spring)\*** |  |
| **Scholarship % (next Spring)\*** |  |
| **Service Activities % (next Spring)\*** |  |
| **Administration % (next Spring)\*** |  |
| **Leave/Offset % (next Spring)\*** |  |

GFaculty E-Signature

Please enter the date when you complete this form. You may make further changes until you SUBMIT this from the Evaluation Menu.

|  |  |
| --- | --- |
| **Full Name\*** |  |
| **Date Completed\*** |  |