

**MIAMI-DADE COMMUNITY COLLEGE  
FACULTY PERFORMANCE REVIEW COVER PAGE**  
(Article 7, Sections 2-3)

**Faculty Member's Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**Department:** \_\_\_\_\_ **Campus:** \_\_\_\_\_  
**Current Rank:** \_\_\_\_\_ **Years in Rank:** \_\_\_\_\_  
**Time Period of This Review: From** \_\_\_\_\_ **To** \_\_\_\_\_  
**Immediate Supervisor's Name:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**The Components of the narrative are:**

1. Student evaluation of faculty
2. Self assessment
3. Faculty visitation
4. Meeting work expectation standards
5. Contributions to Department, School, Campus, College and Community
6. Completion of the previous year's goals
7. Goals for the next academic year

**The following Professional Standards will be addressed in the narrative:**

1. Performance inside and outside of the classroom
2. Incorporation of strategies that motivate students to learn
3. Ability to create a climate conducive to learning
4. Evidence of student learning, including student success and retention

**Chairperson's Rating:**

**Commendable Performance** \_\_\_\_\_  
**Satisfactory Performance** \_\_\_\_\_  
**Performance Needs Improvement** \_\_\_\_\_

**Signatures:**

_____	_____	<b>Addendum Attached:</b> Yes _____ No _____
<b>Faculty Member</b>	<b>Date</b>	
_____	_____	
<b>Immediate Supervisor</b>	<b>Date</b>	
_____	_____	<b>Comments Attached:</b> Yes _____ No _____
<b>Associate Dean/Director</b>	<b>Date</b>	
_____	_____	<b>Comments Attached:</b> Yes _____ No _____
<b>Dean</b>	<b>Date</b>	
_____	_____	<b>Comments Attached:</b> Yes _____ No _____
<b>Campus President</b>	<b>Date</b>	