SOUTHWESTERN COLLEGE

FACULTY EVALUATION FORM C
COUNSELING & NON-INSTRUCTIONAL FACULTY

FACULTY NAME: **<Slct> 20**

NON-INSTRUCTIONAL ACTIVITY OBSERVED:

SCHOOL/SERVICE AREA: **DEPARTMENT:**

EVALUATOR'S NAME: **TITLE:** <Select>

DATE OF VISITATION: **# OF STUDENTS:**

All PC and Mac users please note: This form must be opened using **Adobe Reader**; **any forms opened/used in "Preview Mode" will not function properly.**

DIRECTIONS: Every item, as it pertains to instructional/non-instructional faculty members, must contain specific comments including an example to illustrate the evaluator's point and suggestions for improvement if applicable. Each category includes a concise parenthetical, descriptive prompt; however, the evaluator's comments are not limited to those descriptors. Please select the most relevant rating from each drop down box.

OBSERVED NON-INSTRUCTIONAL ACTIVITY AND RELEVANCE TO SERVICE AREA:

INSTRUCTIONAL TECHNIQUES BEING USED:

☐ **Lecture**	☐ **Class Discussion**	☐ **Small Group Activities**
☐ **Individual Student Assistance**	☐ **Interactive Activity**	☐ **Internet**
☐ **Audio/Visual**	☐ **Web-enhanced**	☐ **E-counseling/Online Session**

GOALS/OBJECTIVES: <Select>

Select a rating that is most relevant from the drop down box (left).
8 – 10 = Strong | 6 – 7 = Competent | 4 – 5 = Marginal | 1 – 3 = Unsatisfactory.

(Clearly stated verbally or written)
Comments:

Check here if continued on Addendum ☐

Evaluation Scale: 8 – 10 = Strong | 6 – 7 = Competent | 4 – 5 = Marginal | 1 – 3 = Unsatisfactory

ORGANIZATION OF SESSION: <Select>

(Organized progression from each activity to the next)

Comments:

Check here if continued on Addendum ☐

USE OF TIME: <Select>

For non-instructional activity (Punctuality and use of non-instructional activity time):

Comments:

Check here if continued on Addendum ☐

Non-instructional Activity TIME MANAGEMENT: <Select>

(Control of non-instructional activity/contact time)

Comments:

Check here if continued on Addendum ☐

Evaluation Scale: 8 – 10 = Strong | 6 – 7 = Competent | 4 – 5 = Marginal | 1 – 3 = Unsatisfactory

EXPERTISE IN SUBJECT AREA: <Select>

(Mastery of and currency in subject matter)

Comments:

Check here if continued on Addendum ☐

COUNSELING DELIVERY MODES: <Select>

(Mastery of learning styles & cognitive processes)

Comments:

Check here if continued on Addendum ☐

PRESENTATION AND DELIVERY: <Select>

(Awareness of demeanor, vocabulary and articulation)

Comments:

Check here if continued on Addendum ☐

Evaluation Scale: 8 – 10 = Strong | 6 – 7 = Competent | 4 – 5 = Marginal | 1 – 3 = Unsatisfactory

STUDENT INVOLVEMENT: <Select>

(Evidence of active engagement and participation by students)

Comments:

Check here if continued on Addendum ☐

LEARNING ENVIRONMENT: <Select>

(Creates an environment conducive to learning)

Comments:

Check here if continued on Addendum ☐

RAPPORT: <Select>

(Evidence of mutual respect and professionalism)

Comments:

Check here if continued on Addendum ☐

Evaluation Scale: 8 – 10 = Strong | 6 – 7 = Competent | 4 – 5 = Marginal | 1 – 3 = Unsatisfactory

OVERALL NON-INSTRUCTIONAL ACTIVITY OBSERVATION SCALE: <Select>

SUMMARY EVALUATION:

Comments:

Check here if continued on Addendum ☐

Evaluator's Signature: _____ Date: _____

Dean's Signature: _____ Date: _____

Dean Comments (Optional): _____

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Faculty Signature: _____ Date: _____

Faculty Comments (Optional): _____

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