PERFORMANCE IMPROVEMENT PLAN (PIP) FORM

FOR FACULTY EVALUATION

(Adjunct, Classroom, Coordinating, Counseling, Library, Nursing, and Online)

Name of Evaluee:	Name of Evaluator:
Date:	
(Attach separate pages for each numbered item if neces	ssary)
1. Evaluator's identification of the area(s) needing imp	provement:
Classroom observation Student questionnaires Self-assessment	
Division Dean/Responsible Administrator's ob	oservation
PortfolioDivision Dean/Responsible Administrator's as	sessment of non-teaching responsibilities
Please describe in detail the area(s) needing improvement	ent and how they should be addressed:
2. Timeline for addressing area(s) needing improvement	nt:
One semester (for adjunct faculty) Two semesters (for tenure-track faculty) Three semesters (for tenured faculty)	
3. Evaluee's plan for addressing the area(s) needing in	nprovement:
4. Evaluator's assessment of the completion of the per timeline:	formance improvement plan at the end of the
EVALUATOR COMMENTS:	

I have met with the evaluee and discussed the evaluee's performance improvement plan.	
Signed:Evaluator	Date:
Evaluator	
EVALUEE COMMENTS:	
I have met with the evaluator and discussed	my performance improvement plan.
Signed:	Date:
Evaluee	