

APPENDIX A

LECTURER ANNUAL SELF-ASSESSMENT

This form may be used by full-time and part-time lecturers with one-year or three-year appointments. Note: Lecturer self-assessments are voluntary on the part of the lecturer.

Due to Department Chair: Monday, February 15, 2021

Name _____ Department _____

Date submitted to Department Chair: _____ Dept. Chair initials _____

Evaluation Periods: Spring Semester 2020, Cruise 2020, and Fall Semester 2020

1. Describe your work requirements, as stipulated in your appointment letter. (Attach a copy of your appointment letter to this document.)

Spring Semester 2020

Cruise 2020 (if applicable)

Fall Semester 2020

2. Describe your effectiveness in fulfilling these requirements. (Attach additional pages, if needed)

3. Please feel free to add other comments or provide additional information. (Attach additional pages, if needed)