



Adjunct Instructor Teaching Evaluation Form

Supervising department chairs/program coordinators/directors/dean should complete this form for adjunct instructors each semester.

Name of adjunct instructor: _____

Name(s) of reviewer: _____

Department/School/College: _____

Courses taught this semester:

Course prefix/ number	Course title	Semester	Year	Enrollment

Please evaluate the adjunct instructor based on data from student evaluations, peer classroom observations and/or supervisor's classroom observations.

Evaluative Comments:

a. Overall design of the course:

b. Appropriateness of assignments and assessments:

c. Delivery of Course

d. Factors affecting effectiveness of instruction (e.g. course enrollment, in adequate preparation time, etc.)

e. Overall Comments:

Is this adjunct instructor eligible for future adjunct instructor appointment?

Yes

No

Signature of Reviewer

Date

**The supervising department chair/school director/program coordinator/
director/dean will keep the original in the Department/School Office or
College Dean's Office.**

5/2014