**Faculty Recommendation Form**

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| **Faculty Name** |  |  | **Department/Division** |  |
|  | | | | |
| **Faculty Start Date** |  |  | **Tenure Date (if applicable)** |  |

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| Faculty evaluations: (Please summarize completed faculty evaluations indicating strengths and weaknesses. Please list how identified weaknesses have been addressed.) |
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| Enrollments: Do enrollment trends justify renewing the instructor’s contract?  (Indicate FTE taught each academic year – comment on causes of low FTE and reasons to justify continued employment if appropriate.) |
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| Other Comments: |
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| Executive Director or Director Recommendation:   * Renew Contract * Non-Renewal * Grant Tenure (if applicable) |  | | |
|  | Signature | Date | |
| Dean Recommendation:   * Renew Contract * Non-Renewal * Grant Tenure (if applicable) |  | | |
|  | Signature | | Date |
| Vice President of Instruction Recommendation:   * Renew Contract * Non-Renewal * Grant Tenure (if applicable) |  | | |
|  | Signature | | Date |
| Vice President of Instruction Comments: | | | |