## APPENDIX C - SECTION II

## BASIC AND COMPREHENSIVE EVALUATION SUMMARY FORM FOR ALL FACULTY

Name Meml	e of Faculty ber:		Emplo	oyee#:			
Discir	cipline: Department:		College:				
-							
		_	mprehensive				
Status:							
Check all that apply:		☐ Tenure track contract facul	Tenure track contract faculty				
		Select: B-1 B-2	☐ B-3 (year: ☐ 3 or	r 🗌 4)			
☐ Limited (including PACE) or long-term substitute							
		Adjunct faculty					
This ( apply		olies to, check all that	Face to Face Class	Online  Hybrid			
A. P	A. Professional Qualities						
	Professiona	lism	Meets/Exceeds Expectations	Needs to Improve			
1.	Keeps curren	nt in discipline.					
2.	Interacts or c	ommunicates with peers.					
3.	Accepts cons	structive criticism well.					
4.	Maintains add	equate and appropriate records.					
5.	Submits grades and/or other required information on time.						
6.	Attends requi	ired meetings.					
7.	Is regularly a	vailable to students.					
8.	Fulfills profes	ssional development es.					
9.	Participates i	n culturally responsive training.					
	Sources: (sta	ate sources of data)					
	Professiona	I Contributions	Meets/Exceeds Expectations	Needs to Improve			
10.	Faculty include	des SLOs on class syllabi.					
11.	appropriate c	e Faculty Only) Makes contribution to the college by tively on a committee, projects, nments, etc.					
12.	(For Full Time appropriate condiscipline/dep	e Faculty Only) Makes contributions to the partment and assumes an share of faculty responsibilities					
13.	(For All Faculty) Develops and disseminates						
	Sources: (sta	te sources of data)					

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Attach appropriate form for Section B.	Complete Sections C and D.						
C. Overall Evaluation:   Satisfacto	ry Needs to improve	Unsatisfactory					
D. Comments, Recommendations, and Im	provement Plans where applicable:						
Insert comments in text box or attach	a separate piece of paper:						
	aculty Professional Growth Goals/Plan for next evaluation period: (Evaluee Generated) Insert comments in text box or attach a separate piece of paper:						
Insert comments in text box or attach							
(Select signature section below based on the type of evaluation completed)							
<u> </u>	nure Review	Committee Signatures					
Required as per Article 19 and 42							
Print Name (Chair)	Signature	Date					
	<u> </u>						
Print Name (Dept. Rep)	Signature	Date					
Print Name (Selected Rep)	Signature	Date					
Print Name (Admin Rep)	Signature	Date					
· ····································	o.ga.a.o	2 4.0					
Print Name (Senate Rep)	Signature	Date					
Basic Evaluation for full-time or adjunct faculty — Evaluator Signature (Department Chair or Designee) Required							
Print Name (Chair)	Signature	Date					
Evaluee Signature Required for Basic and Comprehensive Evaluations I have received a copy of this evaluation but my signature does not necessarily indicate my understand that I have ten (10) working days to have a written statement attached to this eval it is sent to my personnel file in the Human Resources Division.							
Print Name	Signature	Date					
Accepted by appropriate Vice President or designee							
Print Name:	Signature:	Date:					
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Name of Faculty Member:								
B. Knowledge, Skill and Ability as a College Nurse			Needs Improvement					
1.	Demonstrates depth and breadth of knowledge relevant to the position							
	Demonstrates current knowledge of health care, services, and resources including but not limited to		_					
2.	a. Current CPR/AED/First Aid card							
۷.	<ul><li>b. Phlebotomy techniques</li><li>c. Vaccine administration</li></ul>	H	H					
	d. TB testing	H	H					
	e. Handling of pathogens							
3.	Contributes to solutions of Health Services related problems							
4.	Assists individuals in defining their problems							
5.	Adheres to the principle of confidentiality							
6.	Practices appropriate referral of clients to another agency or specialist for assistance							
7.	Provides a non-judgmental environment							
8.	Respects students as individuals							
9.	Demonstrates competency in dealing with emotional needs/crises of clients							
10.	Maintains a regular work schedule							
11.	Maintains scheduled office hours							
12.	Communicates clearly and effectively with clients							
13.	Communicates clearly and effectively with faculty, staff, and administration							
14.	Continually works to improve professional effectiveness							
15.	Plans and implements an ongoing health education program							
16.	Submits required records and reports in a timely manner							
17.	Documents charts through completed SOAP notes							
18.	Functions as an effective nurse with a minimum of supervision							
19.	Actively contributes to college community and fulfills committee and other institutional obligations							
20.	20. Conforms to District and college policies affecting the delivery of health services							
Sou	rces: (State sources of data). Narrative assessment: (insert comments here or attach separ	ate she	et).					