

**Department**

**College**

**Policy Statement Concerning:**

**Personnel Review and Evaluation Standards/Procedures**

- **Performance Evaluation Criteria**
- **Annual Evaluation**
- **Reappointment Evaluation for:**
  - **Annual Reappointment Reviews**
  - **Mid-Tenure Review**
- **Tenure**
- **Promotion**
- **Professorial Performance Award**
- **Chronic Low Achievement**
- **Post-Tenure Review**
- **Non-Tenure Track Faculty Titles**

Approved by Faculty Vote on ()

**NEXT REVIEW DATE:**

\_\_\_\_\_  
Department Head's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Dean's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Provost's Signature

\_\_\_\_\_  
Date