

SELF-APPRAISAL: THIS PAGE WILL BE COMPLETED BY FACULTY MEMBER. ALL PARTS OF THIS DOCUMENT SHOULD BE COMPLETED WITH ADOBE ACROBAT FOR MAXIMUM COMPATIBILITY.

Appraisal Period: From _____ to _____

Name _____

Department _____

Current Rank _____ Date Rank Achieved _____

The annual review of faculty is outlined in [RIT Policy E07.0](#). Faculty should review this policy to familiarize themselves with all aspects of the appraisal process and expectations.

PLANS OF WORK

Please report the percentages of effort in each of the four categories below from your two POWs. Because a POW is based on Academic Year and the Appraisal is based on Calendar Year, the percentages may be different for the Spring and Fall semesters.

Spring 2025			Fall 2025		
1. Teaching/Tutoring	_____	% of effort	1. Teaching/Tutoring	_____	% of effort
2. Scholarship	_____	% of effort	2. Scholarship	_____	% of effort
3. Communication	_____	% of effort	3. Communication	_____	% of effort
4. Service	_____	% of effort	4. Service	_____	% of effort
Total	100	% of effort	Total	100	% of effort

Per RIT Policy E07.0, "...each faculty member shall submit a copy of his or her plan of work for the current and previous academic years." Therefore, you must submit your two plans of work that include the academic terms indicated above.

SELF-APPRAISAL: THIS PAGE WILL BE COMPLETED BY FACULTY MEMBER**LIFE CIRCUMSTANCES IMPACT STATEMENT (optional)**

Per RIT Policy E07.0, "faculty members may also submit an optional "Life Circumstances" Impact Statement. A Life Circumstances Impact Statement allows faculty to document the impact of significant life events during their annual faculty review which affected their productivity or balance of work responsibilities during the evaluation period. These significant events could include life-changing responsibilities such as providing elder care, caregiver responsibilities for an ill or injured member of their immediate family or a family disaster. Childbirth or adoption are excluded, as they are defined in E33.0 – Family Leave Policy."

Life Circumstances Impact Statement:

SELF-APPRAISAL: THIS PAGE WILL BE COMPLETED BY FACULTY MEMBER**1. Teaching/Tutoring**

Provide a brief and thoughtful review (up to 500 words) of what you have achieved relative to the area of teaching/tutoring. Be sure to include an analysis of student evaluations indicating areas of strengths and weaknesses as well as actions taken to address concerns. *Original documentation should not be submitted, but should be available upon request and retained for future tenure and promotion processes.*

The following information is required:

- a. **Teaching/Tutoring Workload Reports.** Please submit [Faculty Workload Reports \(Excel\)](#) for the academic terms indicated on page 1. Faculty are expected to submit separate Excel workload reports for both Spring and Fall terms along with this appraisal.
- b. A brief summary of student evaluation ratings in text, tabulated, or graphic form.

SELF-APPRAISAL: THIS PAGE WILL BE COMPLETED BY FACULTY MEMBER**2. Scholarship (for tenured and tenure-track faculty only)**

Provide a brief and thoughtful review (up to 500 words) of what you have achieved relative to the area of scholarship/creative activity. *Original documentation should not be submitted, but should be available upon request and retained for future tenure and promotion processes.*

The following information is required for each scholarship/creative activity (Search <https://www.rit.edu/academicaffairs/facultyscholarship/submit/list.php> to retrieve your submissions. You may also choose to provide your list of scholarship/research activities from this list):

Scholarship/creative artifacts

- How was it documented? (*new written work, creation of work or techniques/processes, etc.*)
- How was it disseminated (*exhibitions or displays, publications, presentations, etc.*) or is it currently in review?
- How was it peer-reviewed? (*review, evaluation, grant, honor, award, juried exhibition, competition or publication, etc.*)
- Were students involved in the scholarship?

Grants

- Did you submit any grant proposals (even if they weren't funded or are still in review)?
- Who were the collaborators, if applicable?
- How was it peer-reviewed?
- If you received a grant, who was it from?
- Where are you in the grant cycle?

SELF-APPRAISAL: THIS PAGE WILL BE COMPLETED BY FACULTY MEMBER**3. Communication**

Provide a brief and thoughtful review (up to 500 words) of what you have achieved relative to the areas of communication. For communication guidance for NTID faculty, and the Communication Assessment Checklist, refer to <https://www.rit.edu/ntid/president/academic-affairs#college-policies-and-guidelines>. *Original documentation should not be submitted, but should be available upon request and retained for future tenure and promotion processes.*

SELF-APPRAISAL: THIS PAGE WILL BE COMPLETED BY FACULTY MEMBER**4. Service**

Provide a brief and thoughtful review (up to 500 words) of what you have achieved relative to the area of service. Service activities are those taken on in order to benefit one's community at any level within or external to the university. Examples include participation on or leadership of a school, college, or university committee, recruitment efforts, development efforts, or participation or leadership role in a professional organization, etc. *Original documentation should not be submitted, but should be available upon request and retained for future tenure and promotion processes.*

SELF-APPRAISAL: THIS PAGE WILL BE COMPLETED BY FACULTY MEMBER

5. Overall comments (optional)

If you choose to do so, provide a brief review (up to 500 words) of your overall performance during this appraisal period. *Original documentation should not be submitted, but should be available upon request and retained for future tenure and promotion processes.*

SIGNATURE INSTRUCTIONS:

- (1) Please use Digital Signature.
- (2) Do NOT lock/certify the entire document.
- (3) Once signed, pages 1-7 will be locked and unalterable.

FACULTY MEMBER'S SIGNATURE / DATE

THIS PAGE WILL BE COMPLETED BY THE DEPARTMENT CHAIRPERSON.

Please check faculty status: Tenured Faculty Tenure Track Faculty Lecturer Other (specify)

FACULTY MEMBER	CHAIRPERSON	PERIOD FROM: TO:
-----------------------	--------------------	---

Teaching/Tutoring	Communication	Scholarship	Service	Overall Rating
(Check one) NA	(Check one)	(Check one) NA	(Check one)	(Check one)
<input type="checkbox"/> Outstanding	<input type="checkbox"/> Outstanding	<input type="checkbox"/> Outstanding	<input type="checkbox"/> Outstanding	<input type="checkbox"/> Outstanding
<input type="checkbox"/> Exceeds Expectations	<input type="checkbox"/> Exceeds Expectations	<input type="checkbox"/> Exceeds Expectations	<input type="checkbox"/> Exceeds Expectations	<input type="checkbox"/> Exceeds Expectations
<input type="checkbox"/> Meets Expectations	<input type="checkbox"/> Meets Expectations	<input type="checkbox"/> Meets Expectations	<input type="checkbox"/> Meets Expectations	<input type="checkbox"/> Meets Expectations
<input type="checkbox"/> Does Not Meet Expectations	<input type="checkbox"/> Does Not Meet Expectations	<input type="checkbox"/> Does Not Meet Expectations	<input type="checkbox"/> Does Not Meet Expectations	<input type="checkbox"/> Does Not Meet Expectations
<input type="checkbox"/> Unsatisfactory	<input type="checkbox"/> Unsatisfactory	<input type="checkbox"/> Unsatisfactory	<input type="checkbox"/> Unsatisfactory	<input type="checkbox"/> Unsatisfactory

SIGNATURE INSTRUCTIONS:

- (1) Please use Digital Signature.
- (2) Do NOT lock/certify the entire document.
- (3) Once signed, pages 1-8 will be locked and unalterable.

CHAIRPERSON'S SIGNATURE / DATE

Per RIT Policy E07.0, the appraisal process continues as follows:

"II.G A joint meeting between the faculty member and the department head to discuss the results of the annual review and the proposed plan of work for the next academic year contract period. Based on this meeting, the plan of work shall be developed in accordance with II.F. In addition, the department head may choose to amend the annual review. The faculty member has the opportunity to include a response to the annual review that becomes part of the official documentation."

Regarding the POW for the next academic year, section II.F.1.b states that "the plan of work must be approved and signed by the faculty member, department head, and dean." The AY 2025-2026 POWs for all faculty members in a department will therefore be submitted to the Office of the NTID AVPAA no later than May 1, 2025 for review.

THIS PAGE WILL BE COMPLETED BY THE DEPARTMENT CHAIRPERSON.

STATEMENT REGARDING PROGRESS TOWARDS TENURE

This statement must be completed by the chairperson as part of the annual appraisal for non-tenured faculty in a tenure-track position.

You will be reviewed for tenure and promotion to associate professor by the college tenure committee in AY ____.

Your Third-Year Comprehensive Review was/will be conducted in AY ____.

Making satisfactory progress toward tenure.

Making progress toward tenure, but could focus additional effort in the areas indicated below.

Limited progress toward tenure. Additional effort is needed in the areas indicated below.

Not making progress toward tenure.

Additional Comments:

SIGNATURE INSTRUCTIONS:

- (1) Please use Digital Signature.
- (2) Do NOT lock/certify the entire document.
- (3) Once signed, pages 1-9 will be locked and unalterable.

CHAIRPERSON'S SIGNATURE / DATE

COMMENTS BY CHAIRPERSON:

SIGNATURE INSTRUCTIONS:

- (1) Please use Digital Signature.
- (2) Do NOT lock/certify the entire document.
- (3) Once signed, pages 1-10 will be locked and unalterable.

CHAIRPERSON'S SIGNATURE / DATE

COMMENTS BY FACULTY MEMBER in response to Chair's comments (optional, but signature required):

I have reviewed the preceding and, at my option, have included the above response. A signature does not imply agreement with the appraisal.

SIGNATURE INSTRUCTIONS:

- (1) Please use Digital Signature.
- (2) Do NOT lock/certify the entire document.
- (3) Once signed, pages 1-11 will be locked and unalterable.

FACULTY MEMBER'S SIGNATURE / DATE
--