**UNIVERSITY OF HAWAI‘I - WEST O‘AHU**

**CONTRACT RENEWAL APPLICATION**

**FOR ACADEMIC AFFAIRS FACULTY SPECIALISTS AND LIBRARIANS 2023-2024**

**Name**

 **Department/Division/Program**

\_\_ **Probationary Review (tenure track faculty)**

**\_\_** **Non-tenure track faculty**

**Classification/Rank**

 **College/Center % FTE**

**Date of Initial UHWO appointment**

**Period covered by this evaluation From: To:**

***(Check your PNF for the above information)***

This evaluation should assess each faculty member’s performance in accordance with Article XII, E., 1. of the 2021-2025 UHPA-BOR/UH Agreement as follows: “…the Faculty Member’s performance has been assessed for strengths and weaknesses and has been rated as satisfactory, that there is a continuing need for the Faculty Member’s services at the University, and that the Faculty Member has made the professional improvement or has demonstrated the professional and personal qualities needed by the Department…”

Please attach brief written narrative assessments of this faculty member’s teaching, research and service (for Instructional faculty: Research, Specialist, Librarian, and Agent Faculty should be evaluated in appropriate categories). This narrative will be used solely for determining contract renewal and is not part of the tenure and/or promotion process. If your evaluation identified concerns, it is suggested that you include specific comments to help this faculty member improve in the areas of

weakness(es). In addition, please comment on the future need for the position each time the applicant is renewed (see the 2021-2025 UHPA-BOR/UH Agreement Memorandum of Understanding regarding “Future Need”).

**Assessment by Faculty Personnel Committee Assessment by Division Chair/Program Director**

**A.** Written narrative by appropriate categories (*please attach*) **A.** Written narrative by appropriate categories (*please attach*)

**B.** Overall rating: Satisfactory Unsatisfactory **B.** Overall rating: Satisfactory Unsatisfactory

**C.** There is a future need for this position: Yes No **C.** There is a future need for this position: Yes No

**D.** Recommendation for annual renewal of contract: **D.** Recommendation for annual renewal of contract:

 Renewal Non-renewal

 Renewal Non-renewal

Name of Faculty Personnel Committee Convener Name of Division Chair

Signature of Faculty Personnel Committee Convener Signature of Division Chair

**Probationary Faculty Members Receipt of Annual Assessments**

The following portions of the 2021-2025 UHPA-BOR/UH Agreement are provided for your information and understanding. Renewal of Contracts During the Probationary Period

Article XII, Section E., 1.:

Recommendations for renewal shall require that the Faculty Member’s performance has been assessed for strengths and weaknesses and has been rated as satisfactory, that there is a continuing need for the Faculty Member’s services at the University, and that the Faculty Member has made the professional improvement or has demonstrated the professional and personal qualities needed by the Department, or similar considerations. A positive assessment does not necessarily assure renewal of appointment.

Probationary Service

Article XII, Section C.1.b:

The probationary period ends by the granting of tenure, the refusal of tenure by the Employer, or the non-renewal of appointment. During this period, probationers do not have a claim to their position and the Employer, through its officers, may exercise its prerogative of non-appointment without a statement of reasons.

Non-reappointment, Statement of Reasons

Article XII, Section E.3:

In a case in which the Employer has exercised its prerogative of non-reappointment, the Faculty Member may within twenty (20)

calendar days of receipt of the written notification request a meeting with the Dean or other appropriate official.

Upon request, the Faculty Member will be advised orally of the reasons for the non-reappointment. Upon written request of the

Faculty Member within ten (10) calendar days of the meeting, the reasons will be confirmed in writing.

**Faculty Member’s Acknowledgment:**

I acknowledge reviewing all pages of this annual evaluation and the attached narrative assessments done by my Faculty Personnel Committee and my Division Chair/Program Director. I realize that these are solely for determining contract renewal and are not part of the tenure and promotion process. I recognize that these are recommendations and that the final decision about the renewal of my contract will be made by the Vice Chancellor for Academic Affairs.

Signature of Faculty Member Date

**Vice Chancellor Decision**

A. There is a future need for this position (see 2021-2025 UHPA/UH Agreement) Yes No

B. Decision for annual renewal of contract:

Based on my review of the dossier and the recommendations from the Faculty Personnel Committee and Division Chair, the following is my decision for annual renewal of contract:

 **Non Renewal Renewal to**

(Circle one: 1 or 2 years) Date

|  |  |  |
| --- | --- | --- |
| **Name of Vice Chancellor** | **Harald Barkhoff**  |  |
| **Signature of Vice Chancellor** |  | **Date**  |

NOTE: Based on initial date of hire: S2/B2, S3/B3: 2, 2, 1; S4/B4: 2, 1; S5/B5: 2 years

**UNIVERSITY OF HAWAI‘**‘**I - WEST O‘AHU**

**Contract Renewal Application**

**NAME**

**ACADEMIC AREA(S)**

**YEAR OF PROBATIONARY SERVICE (circle one) 1 2 3 4 5 6**

**Part I: Credentials and Experience**:

A. DEGREES

Please fill in the table below:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Degree Name** | **Kind** | **Subject Field** | **Institution** | **Date** |
| Baccalaureate |  |  |  |  |
| Master’s |  |  |  |  |
| Doctorate |  |  |  |  |
| Other Degrees |  |  |  |  |

**B. GRADUATE CREDITS OR OTHER WORK TAKEN SINCE LAST DEGREE COMPLETED.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Institution** | **Date** | **Field** | **Credits** |
|  |  |  |  |
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**Part II. Professional Activities (Administration, Program Development, Direct Client Service).** Please see “Appendix A-2: Supplements to Criteria and Guidelines for Faculty Tenure/Promotion” for the complete list of A, B, and C Items. You may wish to append samples of the items listed here. Please use an asterisk (\*) to indicate items completed before date of initial hire at UH West O‘ahu. You may wish to append sample items.

**A. ADMINISTRATION.**

**B. PROGRAM DEVELOPMENT.**

**C. DIRECT CLIENT SERVICE.**

**D. COURSES TAUGHT. List all courses taught, if applicable, in reverse chronological order, beginning this current academic semester for the last three academic years.**

Please use an asterisk (\*) to indicate courses taught in an online, online-hybrid, or other distance education format.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Semester/Year** | **Subject/Course Number** | **Course Title\***  | **Approx. Credit Hours** | **No. of Students** |
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**E. COURSE SYLLABI.** Attach syllabi for all courses taught at UHWO. If you have taught the same course multiple times, please submit only the most recent version of your syllabus. Comment on these submissions, as appropriate.

**F. EVALUATION OF INSTRUCTION.** Please provide student and peer evaluations of teaching. Comment on these submissions, as appropriate.

**G. STATEMENT OF TEACHING PHILOSOPHY.** Please discuss the theories, methods, and practical approaches that guide and inform your pedagogical practices at UHWO.

**Part III. Scholarly Activities (Research/Evaluation, Professional Development).** Please see “Appendix A-2: Supplements to Criteria and Guidelines for Faculty Tenure/Promotion” for the complete list of A, B, and C Items. You may wish to append samples of the items listed here. Please use an asterisk (\*) to indicate items completed before date of initial hire at UH West O‘ahu. You may wish to append sample items.

1. **RESEARCH/EVALUATION.**
2. **PROFESSIONAL DEVELOPMENT.**

**Part IV. Service (University, Professional, Community).** Please see “Appendix A-2: Supplements to Criteria and Guidelines for Faculty Tenure/Promotion” for the complete list of A, B, and C Items. You may wish to append samples of the items listed here. Please use an asterisk (\*) to indicate items completed before date of initial hire at UH West O‘ahu. You may wish to append sample items.

**A. UNIVERSITY SERVICE.**

**B. PROFESSIONAL SERVICE.**

**C. COMMUNITY SERVICE.**

**Part V. Professional Development Activities**

**A. PROFESSIONAL DEVELOPMENT ACTIVITIES PLANNED OR COMPLETED SINCE INITIAL APPOINTMENT AT UHWO:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Institution/Sponsor** | **Date** | **Description** | **Credit/Non-Credit** |
|  |  |  |  |
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**Part VI. Individual Professional Development Plan.** In the space provided below please discuss your professional development plans and assess how these endeavors will benefit your program and the campus as a whole. Your plan should identify all activities in which you will engage that will result in professional growth, including items such as administrative activities, program development, direct client service, your current and future research and/or scholarship plans, your plans for assisting UHWO meet its mission and long-range goals, and your professional development goals.

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