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

**ANNUAL EVALUATION AND CONTRACT RENEWAL RECOMMENDATION**

**FOR STUDENT AFFAIRS SPECIALIST FACULTY 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)***

**NOTE TO FPC & DC:** 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 Unit Head/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 Authorized Unit Head/Program Director

Signature of Faculty Personnel Committee Convener Signature of Authorized Unit Head/Program Director

**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.

**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.

**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.

**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 acknowledgebeing shown all pages of this annual evaluation and the attached narrative assessments done by my Faculty Personnel Committee and my Authorized Unit Head/Program Director no later than December 11, 2023. 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 appropriate Vice Chancellor.

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 Authorized Unit Head/Program Director, 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** | **DeEtte Uwono Koike**  |  |
| **Signature of Vice Chancellor** |  | **Date**  |

NOTE: Based on initial date of hire: Asst Spec: 2, 2, 1; Assoc Spec: 2, 1; Full Spec: 1

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

**Annual Evaluation and Contract Renewal**

**NAME**

**ACADEMIC AREA(S)**

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

**A. DEGREES**

Baccalaureate

Kind Subject Field Institution Date

Master's

Kind Subject Field Institution Date

Doctor's

Kind Subject Field Institution Date

Other Degrees

Kind Subject Field Institution Date

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

Institution Date Field Credits

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

Credit/

Institution/Sponsor Date Description Non-Credit

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

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Semester/** |  |  |  | **No. of** |
|  **Year**  | **Dept/No.** | **Title** | **Credits** | **Students** |
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**E. EVALUATION OF INSTRUCTION. (Please provide Student and or Peer Evaluations of Teaching.)**

**F. COURSE SYLLABI. Attach course syllabi for courses taught this current academic year. Comment on these submissions, if appropriate.**

**G. SERVICE TO COLLEGE/UNIVERSITY/COMMUNITY. List and describe all College, University, and community service activities undertaken during LAST academic year.**

**H. PROFESSIONAL ACTIVITIES AND DEVELOPMENT. List and describe all professional activities in which you engaged during the past three semesters or since your employ. Include such information as: (1) participation in conferences, workshops, and other educational experiences in which you were a participant or contributor; (2) works published (or to be published); (3) new courses developed (include syllabi); (4) written evidence of other creative endeavors.**

**INDIVIDUAL PROFESSIONAL DEVELOPMENT**

**Name**

**Academic Specialization**

**In the space provided below please describe your professional development plan for this current academic year. Your plan should identify all activities in which you will engage that will result in professional growth. Include such activities as: new course development, curriculum materials development, conferences and workshops attended, credit and non- credit courses to be taken, articles to be written, and other activities that will result in professional growth.**

**Professional Development Plan**