COVER SHEET FOR PROPOSED CHANGES TO DEPARTMENT/COLLEGE
PERSONNEL PROCEDURES

In order to facilitate a complete and expeditious review by the Personnel Planning and Review Committee (PP&R) of the change(s) you propose to your personnel procedures, please adhere to the format described below, and also fill out the Background Information. Attach this memo as a cover sheet for the written material you submit to PP&R. PP&R assumes that the initiating Department or College Committee has determined that the proposed new or revised procedures are consistent with Section 600 and with the Collective Bargaining Agreement.

FORMAT: Please use a complete copy of your existing procedures as the starting point for the proposed revisions that you submit to PP&R for approval. Strike over any text that you wish to have deleted from your written procedures, and/or underline any text that you wish to have added to your written procedures.

BACKGROUND INFORMATION:

1. Are proposed changes those of College □ or Department □ procedures? (check one)

2. Date that current proposed changes were sent forward _______ Nov 13, 2009 _______

3. Department or College initiating proposed changes ____________________________

4. Describe briefly the general reason(s) for your proposed change(s) (e.g., "proposed changes were initiated by the Department in response to a request from the College Personnel Committee, which felt that existing promotion criteria were too rigorous").

5. The proposed changes have been approved by the faculty of the College □ or Department □. (check one)

FOR DEPARTMENT PERSONNEL PROCEDURES:

Chair, Department Personnel Committee ____________________________ Date 1/27/2010

Department Chair ____________________________ Date 1/29/2010

FOR DEPARTMENT PERSONNEL PROCEDURES & COLLEGE PERSONNEL PROCEDURES:

Chair, College Personnel Committee ____________________________ Date 1/29/10

College Dean ____________________________ Date 1/29/10

Chair, Personnel Planning and Review Committee ____________________________ Date 5-11-10

(for PP&R use only)

S'10 Approval Date F'10 Effective Date (see attached) 2013-2014 Date of Next Review

n/forms:personnel procedures cover
CALIFORNIA STATE UNIVERSITY, NORTHRIDGE
Computer Science Department
Faculty Teaching Evaluation

Name of Instructor evaluated (FT) (PT): ________________________________
Date/time: ________________________________  No. of students: __________
Class ________________________________

Rating code:  1- low: 2-needs improvement: 3-good: 4-very good: 5-exceptional
Notes:
- Please feel free to use decimal rates such as 4.5 for rating between very good and exceptional.
- If the rating code is not applicable, please make a note.

<table>
<thead>
<tr>
<th>Rating</th>
<th>Comments</th>
</tr>
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<tbody>
<tr>
<td>Covers the class material at the appropriate level</td>
<td></td>
</tr>
<tr>
<td>Presents material clearly</td>
<td></td>
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<tr>
<td>Presentation was technically sound</td>
<td></td>
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<tr>
<td>Appropriate classroom interaction and ability to communicate to students</td>
<td></td>
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<tr>
<td>Creates interest in the subject.</td>
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<tr>
<td>Control of class session</td>
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<tr>
<td>Well-organized lecture</td>
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<tr>
<td>Paces lecture appropriately</td>
<td></td>
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<tr>
<td>Ability to use visual aids to students</td>
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</tbody>
</table>
Was the instructor aware of your visit in advance? YES [] NO []

Where did the instructor excel? What were their strong points?

Where were they weak or in need of improvement?

Evaluator (print): ___________________________ Chair (print name): ___________________________
(sign): ___________________________ (sign): ___________________________
(date): ___________________________ (date): ___________________________

Date