TENURE & RECONTRACTING
Candidate Review

FACULTY - LIBRARIANS

Candidate: ______________________________________________

Year of Service: _________________________________________
Year of Contract: _________________________________________

1. Checklist: _______________ Pages Numbered: _______________

2. Terminal Degree Statement: (Section 2.113) _________________
   - Candidate Qualified: _____________________________________

3. Statement of Departmental Criteria: __________________________

4. Statement of Colleague Assessment: __________________________

5. Role of Department Chair: __________________________________

6. Basic Vita: _______________________________________________
   - Self-Appraisal: __________________________________________
   - Future Plans: ____________________________________________

7. Student Responses (Librarians N/S): _________________________

8. Colleague Assessment: _____________________________________


10. Department Evaluation:
    - Committee Recommendation: ______________________________
    - Committee Signatures (Typed/Signed) _________________________
    - Candidate Signature (Typed/Signed) __________________________
    - Numerical Vote: __________________________________________
    - Reasons for Recommendations: ______________________________

11. Supplemental Documentation: ________________________________

12. Previous Evaluations: _____________________________________

COMMENTS: